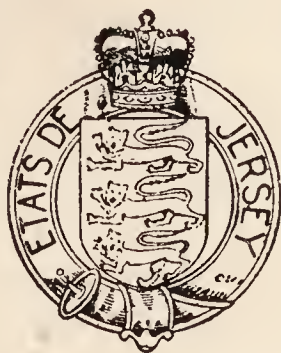


**REPORTS OF THE PUBLIC HEALTH
COMMITTEE FOR THE YEAR ENDED 31st
DECEMBER, 1955 :—**

1. Report of the Committee ;
2. Report of the Medical Officer of Health ;
3. Report of the Chief Sanitary Inspector ;
4. Report on St. Saviour's Hospital submitted in accordance with Article 7 of the " Loi (1890) sur la Régie et l'Administration de l'Asile Publique des Aliénés " ;
5. Report on the Jersey Maternity Hospital ;
6. Report on Sandybrook ; and
7. Report on the Ambulance Service.

*Presented to the States by Senator T. G. Le Marinel,
President of the Public Health Committee, on the
21st September, 1956.*



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STATES OF JERSEY.


21st September, 1956.

THE PRESIDENT OF THE PUBLIC HEALTH COMMITTEE presented to the Assembly the following Reports for the year ended 31st December, 1955 :—

1. Report of the Committee ;
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3. Report of the Chief Sanitary Inspector ;
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5. Report on the Jersey Maternity Hospital ;
6. Report on Sandybrook ; and
7. Report on the Ambulance Service.

THE STATES ordered that the said Reports be printed and that copies thereof be distributed to the Members of the Assembly.

F. DE L. BOIS,
Greffier of the States.



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PUBLIC HEALTH COMMITTEE.

REPORT FOR 1955.

During 1955, the Committee has been concerned with the question of the provision of additional accommodation at the General Hospital and St. Saviour's Hospital.

This matter was the subject of a Report which was presented to the States on 30th November, 1955, and the Committee hopes that its plans for the improvement of the facilities at the General Hospital will receive the approval of the Assembly in 1956.

The Committee, in co-operation with the medical staff, has from time to time taken steps to improve the position at the General Hospital but the only real solution is the construction of additional accommodation.

The problem facing the Committee will be appreciated by the following figures showing how attendances at the Casualty Department have increased during the last five years—

1951	...	...	...	...	...	24,635
1952	...	...	...	...	...	29,680
1953	...	...	...	...	...	31,350
1954	...	...	...	...	...	32,473
1955	...	...	...	...	...	34,106

The X-ray Department was constructed to deal with 4,000 cases per year. Examinations have, however, increased from 2,000 in 1946 to 9,835 in 1955.

Apart from the increasing use which the public is now making of the facilities at the General Hospital two additional contributory factors have to be taken into account—

- (1) the increase in the resident population from 51,000 in 1939 to 57,310 at the 1951 Census.
- (2) the increase in the number of seasonal visitors.

The Committee is therefore particularly concerned that some amelioration in the position should be effected in time for the Summer season of 1958.

GENERAL HOSPITAL REPORTS.

The comparative figures given in the reports submitted to the Committee on the work of the various Departments at the General Hospital show that, in general, the amount of work tends to increase year by year. A typical example of the tendency is seen in the Casualty Department where attendances have nearly doubled in the ten year period from 1945 to 1955.

The existing Medical and Nursing staffs have no difficulty in dealing with this increase in the volume of work but the arrival of new and modern equipment and the increase in the number of patients is producing an acute shortage of working space in all departments. This is particularly noticeable in the Casualty, X-ray and Out-Patient Departments where a position has almost been reached where it will be impossible to deal with any further increase in the work unless additional accommodation is provided. The construction of the new block envisaged by the Committee, by providing a new X-ray and Casualty Department, a new theatre block and private beds, will, at one stroke, relieve the present congestion to a very considerable extent.

MEDICAL DEPARTMENT.

Dr. Bentlif states that the most notable feature during 1955, was the increasing use which was made of the reciprocal health service arrangements with

the United Kingdom. Under this scheme seriously sick patients are, without any delay, transferred to an appropriate hospital in England. Ambulatory cases are also sent to the appropriate Out-Patients Department of the various teaching hospitals.

The number of patients seen at the Medical and Dermatological Clinics during the past three years was as follows :—

SKIN CLINIC			1955		1954		1953	
Old patients	...	...	706		684		621	
New patients	...	...	286	992	249	933	337	958
MEDICAL CLINIC								
Old patients	...	...	635		568		543	
New patients	...	...	100	735	70	638	72	615

MEDICAL CLINIC.

Dr. R. O'Meara reports that, of the four cases of rheumatoid arthritis which were chosen originally for Cortisone treatment, only two are still continuing the treatment and the efficiency of the drug in this condition is disappointing. It seems to be of great value however, in some other conditions, notably asthma.

The total number of cases seen at this clinic over the past three years was as follows :—

1955	1954	1953
826	751	619
(including 81 new)	(including 92 new)	(including 78 new)

SURGICAL DEPARTMENT.

Mr. St. John Birt points out that the amount of work carried out in the Surgical Department continues to show a slight increase year by year. However, with the present number of surgical beds and operating theatre space available, the department is working to capacity.

The waiting list for male surgical cases is small and the number of male surgical beds available appears to be adequate at the moment. However, there is still a long waiting list for female surgical cases and it is clear that there are only two methods of meeting this situation, either,

- (1) making more beds available outside the hospital for the elderly female patients who need a prolonged period of treatment, or,
- (2) providing more surgical beds inside the hospital.

Should there be any increase in the total surgical work, however, it will be essential to provide more operating theatre space. The construction of the proposed new block will achieve both these ends since it will provide a modern operating suite containing two theatres, and will permit of the present operating theatre, which is badly situated, being converted into an additional female ward.

Routine statistics are as follows :—

SURGICAL CLINICS.

	1955	1954	1953
Old patients	1,894	1,843	1,932
New patients...	1,107	1,034	954

ORTHOPÆDIC CLINIC.

Old patients	1,452	1,416	1,714
New patients...	429	431	625

OPERATIONS	1,015	974	1,039
-------------------	-------	-----	-------

MOTOR-CYCLE ACCIDENTS.

Mr. St. John Birt again stresses the fact that, although there has been a slight drop in the number of accidents, the number of motor-cycle injuries still gives serious cause for concern. He emphasizes the

fact that the predominant features of motor-cycle accidents are injuries to the head or to the legs and that over three quarters of all such cases admitted to Hospital have head injuries whilst a third suffer injuries to the lower limbs.

In Mr. St. John Birt's opinion, if it were made compulsory for drivers of motor-cycles and their pillion passengers to wear crash helmets it would result not only in a great saving of life but also in the prevention of many cases of permanent disability. He points out that the price of a crash helmet is £2, which is equivalent to thirteen gallons of petrol, and it would therefore seem that financial grounds could hardly provide a valid objection to such a law.

Cardiological Department.

Dr. R. O'Meara refers to the fact that several unusual cases were referred to this clinic by outside doctors, one of which was of considerable interest. This was a girl of fourteen who was sent to the clinic by Dr. Darling and who was suffering from coarctation (narrowing of the aorta.). An operation was performed in England at which the narrowed area was removed and the aorta successfully resected. The girl, who was unlikely to reach middle-age, made a complete recovery and is now perfectly normal. This case is quoted to illustrate the value of School Medical Inspections.

Patients seen at the clinic during the past three years were as follows :—

<u>1955</u>	<u>1954</u>	<u>1953</u>
651	504	530
(including 131 new patients).	(including 142 new patients).	(including 141 new patients).

Ear, Nose and Throat Department.

Dr. L. L. Ratazzi reports that, owing to the outbreak of poliomyelitis, all nose and throat operations

were suspended for a period of thirteen weeks. Despite this fact, the waiting list for tonsil and adenoid operations is negligible since the loss of time has been made up.

Statistics for the past three years are as follows :—

	1955	1954	1953
Number of attendances	1,352	1,321	1,648
Number of operations	294	313	377
Number of minor operations (out-patients)	—	55	106

Children's Department.

Dr. H. L. Durell reports that among the admissions there were nine deaths,—four being due to congenital deformity incompatible with life, two to pneumonia, one to prematurity, one to polioencephalitis, and one to pyloric stenosis.

Patients referred to England for further diagnosis or treatment included one post vaccinal encephalomyelitis, and seven others required specialised medical or surgical treatment.

	1955	1954	1953
Admissions to Ward	239	217	230
NUMBER SEEN IN CLINIC			
Old patients	296	278	297
New patients	63	63	71
	<hr/> 359	<hr/> 341	<hr/> 368

Dr. Durell refers to the inconvenience caused to the work of the Department by the closure of the Ward during the Summer in order to provide a poliomyelitis isolation unit, and expresses the hope that it may be possible to make other arrangements for any future cases before the emergency arises.

Psychiatric Department.

Of the new patients, 54 were referred from the Medical and Surgical Wards. 151 were admitted to the Observation Ward, of whom 28 were certified.

29 cases of attempted suicide were seen during the year, of which 21 were females and 8 were males.

14 people were admitted with acute alcoholic poisoning, of whom 4 were admitted more than once.

Dr. Darling carried out 39 Intelligence Tests on children referred to the Child Guidance Clinic, and 2 Intelligence Tests on adults. 2 mentally deficient children were transferred to Maison de la Martine.

In addition to her work at the Adult and Child Guidance Clinics Miss Findlay, Psychiatric Social Worker, has undertaken the following visits and interviews :—

ADULTS	Visits	256
	Interviews in the Department	1,769
CHILDREN	Visits (Home and School)	180
	Interviews in the Department... ..	268
GENERAL	Visits (non-psychiatric and geriatric)	119
	Interviews in the Department	617

With regard to the geriatric work, a large number of old people sent in for care and attention have been found to be in a terribly neglected state. Some of these can only be placed in Institutions such as Sandybrook or the Little Sisters, others are placed in private Homes such as Miss Newman's or Seacliff, Gorey, whilst others are sent home with a Home Help, or boarded out under the Committee's boarding out scheme for the aged and infirm. To give the personal consideration so necessary in this type of case, a very large proportion of time must be devoted to the interviewing and visiting of relations, etc.

Dr. Louise O'Meara gives the following statistics on the work of her Department :—

ATTENDANCES.

	1955		1954		1953
	<u>1955</u>		<u>1954</u>		<u>1953</u>
<i>Adult Clinic.</i>					
Old patients	1,450		1,657		1,535
New patients	220	1,670	192	1,849	196
	<u>220</u>		<u>192</u>		<u>196</u>
					1,731
<i>Child Guidance Clinic</i>					
Old patients	265		276		352
New patients	34	299	56	332	59
	<u>34</u>		<u>56</u>		<u>59</u>
					411
<i>General cases—mainly geriatric</i>					
... ..		81	—		—

Eye Department

Dr. G. D. Harthan refers to the fact that patients complain at the long time which they have to wait before being seen in the Clinic. This is due to the cramped accommodation which makes it impossible for the Nurse to test visions at the same time that the Surgeon is examining patients. It is therefore necessary for patients to wait until the Nurse has finished testing the visions.

For similar reasons, minor operations can only be undertaken when the Clinic has finished.

Once again it is emphasised that the efficiency of the department is suffering because of inadequate space.

Patients seen at the Clinic during the year were as follows :—

Eye Clinic.

Old patients	1,775	
New patients... ..	731	2,506

Orthoptic Clinic.

Old patients	811	
New patients	71	882

X-ray Department.

Dr. J. B. Hearn reports that the number of cases referred to this department for X-ray diagnostic examination during the year amounted to 9,835—an increase of 1,022 over the year 1954.

During 1955, not only was there a further increase in the general number of examinations, but also a considerable increase in the more specialised examinations.

With this increase in the work, there have been difficulties in meeting the demand with only one radiographic machine. Two features helped in this problem: (1) The speeding up of the administrative side of the work by the appointment, in April, of a full-time Secretary; (2) The transfer, in October, of the Mass Miniature machine to a separate site at the North East corner of the courtyard. This machine is now run by an employee of the Public Health Department who is responsible for the radiography and also for the development of the miniature photographs. This move was made, not only to ease the strain on our own radiographers, but with a view to opening a second diagnostic room in the near future.

In radio-therapy, 24 new cases were treated with 96 attendances. This is a considerable reduction on the number of cases treated in 1954. This is due partly because, in Dr. Hearn's opinion, many of the cases are better treated in a big centre with qualified

radiotherapists in charge, and physicists to check the dosage with complete accuracy, and also partly because less cases are being referred for treatment.

The department was built to handle about 4,000 cases a year. By 1949 the figure was 6,581 per year. By 1955, it had risen to 9,835. It is clear from this, that the department is very overloaded. A new diagnostic room will in part ease the load, but this cannot alter the ground area of the department which is of the wrong shape, and is too small. There is no staff room, no toilet facilities for the staff, and the dark room is in an awkward position. The waiting and changing room facilities are much below standard.

Statistics for the past three years are as follows :—

X-ray Department.

	1955	1954	1953
Overdale patients ...	2,071	2,358	2,496
Hospital In-patients ...	1,654	1,389	1,332
Public Health Department (Chests) ...	285	160	55
Extras... ..	214	281	405
Screening	579	528	445
Visitors	275	176	112
Routine Out-Patient Examinations... ..	4,757	3,921	4,035
	9,835	8,813	8,880

X-ray Therapy

Attendances	96	489	454
New patients	24	48	77

Venereal Disease Clinic.

Number of attendances

	1955			1954			1953		
	Old	New	Total	Old	New	Total	Old	New	Total
Male ...	104	34	138	137	12	149	215	36	251
Female..	58	6	64	51	5	56	119	9	128

It will be seen from the above figures that the number of attendances for the year has been maintained.

The work of the Clinic for the year has been carried out satisfactorily and without undue incident.

Casualty Department.

Mr. St. John Birt points out that the work of the Casualty Department continues to increase year by year and that inadequate space continues to be a cause for concern. The present Department is used both for Out-Patient Clinics and for Casualties and the space available is insufficient for either of these two functions alone and totally inadequate for both of them simultaneously.

Whilst the accommodation remains the same as in 1946 attendances have increased as follows :—

	1946	1955
Out-patient attendances	33,910	42,214
Casualty attendances	18,938	34,106

If the efficiency of the department is not to be seriously impaired it is essential that a new Casualty Department should be provided as soon as possible.

It would then be possible to retain the present Department for out-patients only with the possibility that, when the X-ray Department was transferred to the proposed new block, additional accommodation would become available for the use of the Out-Patients Department.

During the year, improved arrangements have been made to “ stagger ” the attendance times of patients attending the Out-Patient clinics, and this has already led to shorter waiting times for these patients.

In addition, with the employment of a whole-time Casualty record clerk, an improved record keeping system is being arranged for the Department which should lead to improved efficiency in the administration.

Dental Department.

Mr. A. S. Swain reports that twenty-one of the Island's schools were visited during the year, and that of the 3,763 children examined, 1,377 were advised to attend for treatment and 963 did so.

A further substantial increase in the number of fillings for children is reported—815 as against 543 in 1954—the appointment of Mr. Dawson for another filling session each week accounts to a large extent for this increase.

Six cases of Vincent's disease of the gums were recorded, three fractured jaws, and eight cases of cysts or tumours of the jaws, which were usually removed in the theatre.

Overdale Hospital was visited when requested and the weekly clinic at St. Saviour's Hospital was held.

Statistics for the past three years are as follows :—

	1955	1954	1953
Total attendances at Clinic	2,736	2,683	2,384
Child attendances	2,041	1,850	1,728
Adult attendances for extractions under anæsthetic	532	643	547
Child attendances for extractions under anæsthetic	1,283	1,310	1,364
Fillings for children	815	543	413
Children dentally examined at School	3,763	3,436	3,641
Number of children found to be in need of treatment	1,377	909	965
Number who attended Clinic	963	776	812

Pharmacy Department.

In the opinion of the Chief Pharmacist, 1955 has been a testing time for the Department, and an estimated overall increase in work of 15% is reported. In particular, outpatient prescriptions increased by about 5,000 whilst injections prepared, and syringes sterilised, were each up by 1,000. Although the additional work has been accomplished successfully with the co-operation and hard work of the staff, and despite a good deal of sickness, the pressure cannot be borne indefinitely by the Department as at present constituted.

The increase in outpatient prescriptions is due, not only to a record visitor season, but also to an inexplicable rise to near peak proportions in the issues during November. The number of 'pink' prescriptions issued was double last year's figures and the number is now significant enough to warrant separate quotation in the returns.

The Department was visited early in the year by members of the local Pharmaceutical Society when a demonstration of apparatus and products was given by the staff.

In drugs, Cortisone is finding its appropriate niche in the therapeutic scheme, and cost £1,429 in 1955. The centre of interest is now the new and fascinating mental drugs such as reserpine, which cost £752, and chlorpromazine, which cost £482 in 1955. These, and other drugs of a similar type, are likely to progress rapidly during the next few years. Unfortunately, although new drugs are being taken into therapeutics at an astonishing rate, old drugs are not relinquished as quickly, and the problems of stocking and the storing of data, are tremendous.

	<u>1955</u>	<u>1954</u>	<u>1953</u>
Number of issues to wards and departments	36,769	36,638	40,870
Dangerous drugs issued to wards and out-patients	490	556	576
Surgical sundries issued	8,384	8,325	8,707
Surgical instrument repairs handled	398	403	398
Intravenous infusions, injections, etc. prepared... ..	4,944	3,981	3,665
Syringes, batches of hypo. needles, special instrument sterilisations ...	8,456	7,104	5,608
Outpatient prescriptions (including N.H.S., Overdale and 842 pink prescriptions)... ..	18,016	13,189	15,674
Sales to individuals, priced issues to other Hospitals and States Institutions, etc.	3,076	3,158	3,261
Gas and oxygen cylinders issued ...	887	845	1,131

Pharmacy, Poisons and Medicines (Jersey) Law, 1952.

The Chief Pharmacist, who undertakes the duties of Inspector under this Law, reports that the administration of the Law continues to be effected with very little trouble and that the majority of the sellers of poisons are most co-operative.

	<u>1955</u>	<u>1954</u>	<u>1953</u>
Visits to chemists, seedsmen, hair-dressers and drug-stores	49	47	75
Visits to grocers and general stores...	82	124	168
Authorization for purchase of strychnine	69	58	50
Test purchases made	34	—	—

Pathological Laboratory.

Dr. E. Geal, whilst reporting some easing in the work of the laboratory as the junior staff gains in experience, states that the provision of adequate supplies of blood for transfusion has become increasingly onerous. As this work does not form part of the normal duties of the laboratory staff any

increase in this service will necessitate changes in the staffing arrangements in order to meet the situation.

	<u>1955</u>	<u>1954</u>	<u>1953</u>
Total number of examinations performed	15,639	14,216	13,941

Chaplain's Report.

The Rev. T. E. Fowler replaced the Rev. L. W. Hibbs as Chaplain on 18th October, 1955, and therefore his report to the Committee is confined to the period 18th October to 31st December, 1955.

The Chaplain states that it is his endeavour to visit each patient at the General and Overdale Hospitals once a week and to be on call at all times.

Services are conducted once a month by the Rev. R. J. Rider who also visits the inmates in the Poor Law Department.

Attendances in the General Hospital Chapel at the celebrations of Holy Communion on Sundays, Festivals and Saints' Days numbered 49.

Ward Communion at the General Hospital numbered 24 and at Overdale 17.

Attendances at Evensong have been well maintained and the presence of Sisters and nurses at the Services have been very gratifying.

The Chaplain concludes his report by suggesting that there is a real need for a small Chapel at Overdale, as, at the present time, it is not possible to arrange separate worship for the staff and patients and further, there is no place for private prayer. The adaptation of an existing small room would, in his opinion, possibly meet the need.

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1955.

I have the honour to present the annual report on the health of the Island of Jersey for the year 1955.

GENERAL STATISTICS.

Area (acres)	28,717
Pouplation (estimated mid-year)	57,239
Number of persons per acre	2
Marriage rate per 1,000 of population	17.2
Birth rate per 1,000 of population	12.9
Death rate per 1,000 of population	12.6
Infant mortality rate per 1,000 live births ...	34.0
Neo-natal mortality rate per 1,000 live births	24.5
Still Birth rate per 1,000 total (live and still) births	18.7
Maternal mortality rate per 1,000 total (live and still) births	1.3
Malignant disease (Cancer) (all forms) morta- lity rate per 1,000 of population... ..	2.5
Tuberculosis (all forms) mortality rate per 1,000 of population	0.12

THE POPULATION.

The estimated mid-year resident and foreign population was 57,239. This figure is 200 less than last year. The resident and foreign population at the last census, taken on the 8th April, 1951, was 57,296.

THE MARRIAGE RATE.

There were 492 marriages during 1955. The number of people marrying was, thus, 984, which gives a marriage rate (or persons married per 1,000 of the population) of 17.2.

TABLE I.

Deaths (exclusive of foetal deaths) cross-classified by cause, sex and age: latest available year, 1955.

List No. (1)	Abbreviated List of 50 Causes for Tabulation of Mortality (Sixth (1948) Revision of the International Lists of Diseases and Causes of Death). (2)	M A L E																		Age not and over stated (21)
		All ages (3)	Under 1 year (4)	1—4 years (5)	5—9 years (6)	10—14 years (7)	15—19 years (8)	20—24 years (9)	25—29 years (10)	30—34 years (11)	35—39 years (12)	40—44 years (13)	45—49 years (14)	50—54 years (15)	55—59 years (16)	60—64 years (17)	65—69 years (18)	70—74 years (19)	75 years and over (20)	
	All causes	354	11	—	3	1	1	2	1	4	5	5	16	19	26	29	39	56	136	
1	Tuberculosis of respiratory system.....	4	—	—	—	—	—	—	—	—	1	—	1	1	1	—	—	—	—	—
2	Tuberculosis, other forms.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3	Syphilis and its sequelae	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—
4	Typhoid fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5	Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6	Dysentery, all forms.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7	Scarlet fever and streptococcal sore throat.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8	Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9	Whooping cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10	Meningococcal infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11	Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12	Acute poliomyelitis	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—
13	Smallpox.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14	Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15	Typhus and other rickettsial diseases.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
16	Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17	Other infective and parasitic diseases.....	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—
18	Malignant neoplasms, including neoplasms of lymphatic and haemato- poietic tissues.....	64	—	—	—	—	—	1	—	—	—	1	5	2	5	5	6	15	24	—
19	Benign and unspecified neoplasms	2	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
20	Diabetes mellitus	3	—	—	—	—	—	—	—	—	1	—	—	1	—	—	1	1	—	—
21	Anaemias	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
22	Vascular lesions affecting central nervous system.....	29	—	—	—	—	—	—	—	—	—	—	—	3	1	—	5	2	18	—
23	Nonmeningococcal meningitis.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
24	Rheumatic fever.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
25	Chronic rheumatic heart disease.....	6	—	—	—	—	—	—	—	1	—	—	—	1	1	—	1	—	2	—
26	Arteriosclerotic and degenerative heart disease.....	72	—	—	—	—	—	—	—	1	—	1	3	5	6	10	11	13	22	—
27	Other diseases of heart	11	—	—	—	—	—	—	—	1	—	—	1	—	—	2	—	1	6	—
28	Hypertension with heart disease.....	10	—	—	—	—	—	—	—	—	—	—	2	—	—	1	2	2	3	—
29	Hypertension without mention of heart.....	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	3	—
30	Influenza	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—
31	Pneumonia	16	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1	2	11	—
32	Bronchitis	9	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	1	5	—
33	Ulcer of stomach and duodenum.....	7	—	—	—	—	—	—	—	—	—	—	—	1	—	1	1	2	2	—
34	Appendicitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
35	Intestinal obstruction and hernia.....	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
36	Gastritis, duodenitis, enteritis and colitis, except diarrhoea of the newborn.....	4	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	2	—
37	Cirrhosis of liver	3	—	—	—	—	—	—	—	—	—	—	1	—	1	1	—	—	—	—
38	Nephritis and nephrosis	6	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	4	—
39	Hyperplasia of prostate.....	4	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	3	—
40	Complications of pregnancy, childbirth and the puerperium	3	2	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
41	Congenital malformations.....	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
42	Birth injuries, postnatal asphyxia and atelectasis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
43	Infections of the newborn.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
44	Other diseases peculiar to early infancy, and immaturity unqualified.....	6	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
45	Senility without mention of psychosis, ill-defined and unknown causes.....	21	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	5	14	—
46	All other diseases (Residual).....	33	1	—	—	—	—	1	—	—	—	—	—	2	3	4	5	9	8	—
47	Motor vehicle accidents.....	5	—	—	2	—	—	—	—	—	1	—	1	—	—	—	1	—	—	—
48	All other accidents.....	15	—	—	1	1	1	—	—	—	—	1	—	1	3	1	—	—	6	—
49	Suicide and self-inflicted injury	9	—	—	—	—	—	—	—	—	1	—	—	—	3	—	—	—	—	—
50	Homicide and operations of war.....	—	—	—	—	—	—	—	—	—	—	—	2	1	3	1	—	—	—	—

Deaths (exclusive of foetal deaths) cross-classified by cause, sex and age: latest available year, 1955.

Abbreviated List of 50 Cases for Tabulation of Mortality (Sixth (1948) Revision of the International Lists of Diseases and Causes of Death).		FEMALE																		
		All ages (3)	Under year (4)	1—4 years (5)	5—9 years (6)	10—14 years (7)	15—19 years (8)	20—24 years (9)	25—29 years (10)	30—34 years (11)	35—39 years (12)	40—44 years (13)	45—49 years (14)	50—54 years (15)	55—59 years (16)	60—64 years (17)	65—69 years (18)	70—74 years (19)	75 years and over (20)	Age not stated (21)
List No. (1)	(2)	366	14	1	3	—	1	—	3	1	1	8	6	7	17	23	39	44	198	—
1	Tuberculosis of respiratory system.....	2	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—
2	Tuberculosis, other forms.....	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
3	Syphilis and its sequelae	5	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	3	—
4	Typhoid fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5	Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6	Dysentery, all forms.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7	Scarlet fever and streptococcal sore throat.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8	Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9	Whooping cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10	Meningococcal infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11	Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12	Acute poliomyelitis	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
13	Smallpox.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14	Measles	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—
15	Typhus and other rickettsial diseases.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
16	Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17	Other infective and parasitic diseases.....	2	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—
18	Malignant neoplasms, including neoplasms of lymphatic and haemato- poietic tissues.....	80	—	—	—	—	—	—	—	—	—	5	1	4	8	11	16	4	31	—
19	Benign and unspecified neoplasms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20	Diabetes mellitus	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—
21	Anaemias	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—
22	Vascular lesions affecting central nervous system.....	49	—	—	—	—	—	—	—	—	—	2	1	2	2	6	8	28	—	—
23	Nonmeningococcal meningitis.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
24	Rheumatic fever.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
25	Chronic rheumatic heart disease.....	6	—	—	—	—	—	—	1	—	—	—	—	1	1	1	—	—	—	—
26	Arteriosclerotic and degenerative heart disease.....	61	—	—	—	—	—	—	—	—	2	—	—	1	1	2	7	12	39	—
27	Other diseases of heart.....	8	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	6	—
28	Hypertension with heart disease.....	14	—	—	—	—	—	—	—	—	—	—	—	1	—	2	—	5	6	—
29	Hypertension without mention of heart.....	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
30	Influenza.....	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
31	Pneumonia	17	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	2	13	—
32	Bronchitis	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	4	—
33	Ulcer of stomach and duodenum.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
34	Appendicitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
35	Intestinal obstruction and hernia.....	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
36	Gastritis, duodenitis, enteritis and colitis, except diarrhoea of the newborn	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	—
37	Cirrhosis of liver	2	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—
38	Nephritis and nephrosis	6	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	5	—
39	Hyperplasia of prostate.....																			
40	Complications of pregnancy, childbirth and the puerperium	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—
41	Congenital malformations.....	6	2	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
42	Birth injuries, postnatal asphyxia and atelectasis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
43	Infections of the newborn.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
44	Other diseases peculiar to early infancy, and immaturity unqualified.....	10	10	—	—	—	—	—	—	—	—	—	—	—	—	1	2	3	30	—
45	Senility without mention of psychosis, ill-defined and unknown causes.....	36	—	—	—	—	—	—	—	—	—	2	—	—	1	2	5	6	12	—
46	All other diseases (Residual).....	28	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
47	Motor vehicle accidents.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
48	All other accidents.....	7	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	6	—
49	Suicide and self-inflicted injury	5	—	—	—	—	—	—	1	—	—	—	—	—	—	1	1	1	1	—
50	Homicide and operations of war.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Deaths (exclusive of foetal deaths) cross-classified by cause and sex: latest available years, 1951 to 1955.

Abbreviated List of 50 Causes for Tabulation of Mortality (Sixth (1948) Revision of the International List of Diseases and Causes of Death).		1951			1952			1953			1954			1955		
List No. (1)	(2)	Both sexes (3)	Male (4)	Female (5)	Both sexes (6)	Male (7)	Female (8)	Both sexes (9)	Male (10)	Female (11)	Both sexes (12)	Male (13)	Female (14)	Both sexes (15)	Male (16)	Female (17)
	All causes	686	359	327	667	341	326	726	381	345	734	377	357	720	354	366
1	Tuberculosis of respiratory system.....	19	13	6	13	8	5	10	9	1	17	11	6	6	—	2
2	Tuberculosis, other forms.....	3	1	2	2	1	1	1	1	—	—	—	—	1	—	1
3	Syphilis and its sequelae	1	1	—	1	1	—	1	1	—	1	—	1	6	1	5
4	Typhoid fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5	Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6	Dysentery, all forms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7	Scarlet fever and streptococcal sore throat.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8	Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9	Whooping cough	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—
10	Meningococcal infections.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11	Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12	Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	2	1	1
13	Smallpox.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14	Measles	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
15	Typhus and other rickettsial diseases.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
16	Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17	Other infective and parasitic diseases.....	2	1	1	4	1	3	2	2	—	3	1	2	3	1	2
18	Malignant neoplasms, including neoplasms of lymphatic and haemato- poetic tissues	138	73	65	138	62	76	133	68	65	142	63	79	144	64	80
19	Benign and unspecified neoplasms	—	—	—	1	—	1	1	1	—	—	—	—	2	2	—
20	Diabetes mellitus	5	2	3	4	—	4	7	3	4	3	2	1	6	3	3
21	Anaemias	5	—	5	4	1	3	4	—	4	4	3	1	4	1	3
22	Vascular lesions affecting central nervous system.....	92	36	56	84	39	45	105	46	59	102	42	60	78	29	49
23	Nonmeningococcal meningitis.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
24	Rheumatic fever.....	—	—	—	—	—	—	—	—	—	2	—	2	—	—	—
25	Chronic rheumatic heart disease.....	—	—	—	—	—	—	—	—	—	—	—	—	12	6	6
26	Arteriosclerotic and degenerative heart disease.....	159	91	68	150	73	77	186	100	86	178	103	75	133	72	61
27	Other diseases of heart.....	1	—	1	1	1	—	2	1	1	7	6	1	19	11	8
28	Hypertension with heart disease.....	7	4	3	14	6	8	21	12	9	32	19	13	24	10	14
29	Hypertension without mention of heart.....	1	—	1	2	1	1	1	—	1	1	1	—	5	4	1
30	Influenza.....	8	4	4	1	1	—	9	5	4	2	1	1	2	1	1
31	Pneumonia	43	25	18	29	15	14	43	26	17	43	21	22	33	16	17
32	Bronchitis	13	11	2	21	13	8	36	23	13	20	15	5	14	9	5
33	Ulcer of stomach and duodenum.....	5	3	2	6	5	1	6	6	—	11	10	1	7	7	—
34	Appendicitis	1	1	—	3	—	3	1	1	—	—	—	—	—	—	—
35	Intestinal obstruction and hernia.....	9	6	3	7	4	3	4	2	2	2	—	2	4	2	2
36	Gastritis, duodenitis, enteritis and colitis, except diarrhoea of the newborn	3	1	2	3	2	1	2	—	2	2	1	1	7	4	3
37	Cirrhosis of liver	1	1	—	8	7	1	3	—	3	1	—	1	5	3	2
38	Nephritis and nephrosis	18	13	5	16	8	8	12	5	7	17	7	10	12	6	6
39	Hyperplasia of prostate.....	1	1	XXXXX	8	8	XXXXX	6	6	XXXXX	5	5	XXXXX	4	4	XXXXX
40	Complications of pregnancy, childbirth and the puerperium	1	XXXXX	1	1	XXXXX	1	—	XXXXX	—	—	XXXXX	—	1	XXXXX	1
41	Congenital malformations.....	1	—	1	1	1	—	—	—	—	—	—	—	9	3	6
42	Birth injuries, postnatal asphyxia and atelectasis	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—
43	Infections of the newborn.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
44	Other diseases peculiar to early infancy, and immaturity unqualified.....	24	16	8	14	8	6	13	8	5	20	10	10	16	6	10
45	Senility without mention of psychosis, ill-defined and unknown causes...	60	20	40	45	15	30	49	16	33	61	21	40	57	21	36
46	All other diseases (Residual).....	38	16	22	43	26	17	35	14	21	38	22	16	61	33	28
47	Motor vehicle accidents.....	6	3	3	8	7	1	8	7	1	2	2	—	5	5	—
48	All other accidents.....	12	9	3	17	10	7	19	14	5	8	6	2	22	15	7
49	Suicide and self-inflicted injury	8	6	2	18	17	1	6	4	2	10	5	5	14	9	5
50	Homicide and operations of war.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

THE BIRTH RATE.

736 live births were registered during the year, giving a birth rate of 12.9 per 1,000 of the population. Occupation years excluded, this is the lowest rate since 1891, when it was first recorded in Jersey.

The following table gives the number of births and the birth rates for the past ten years.

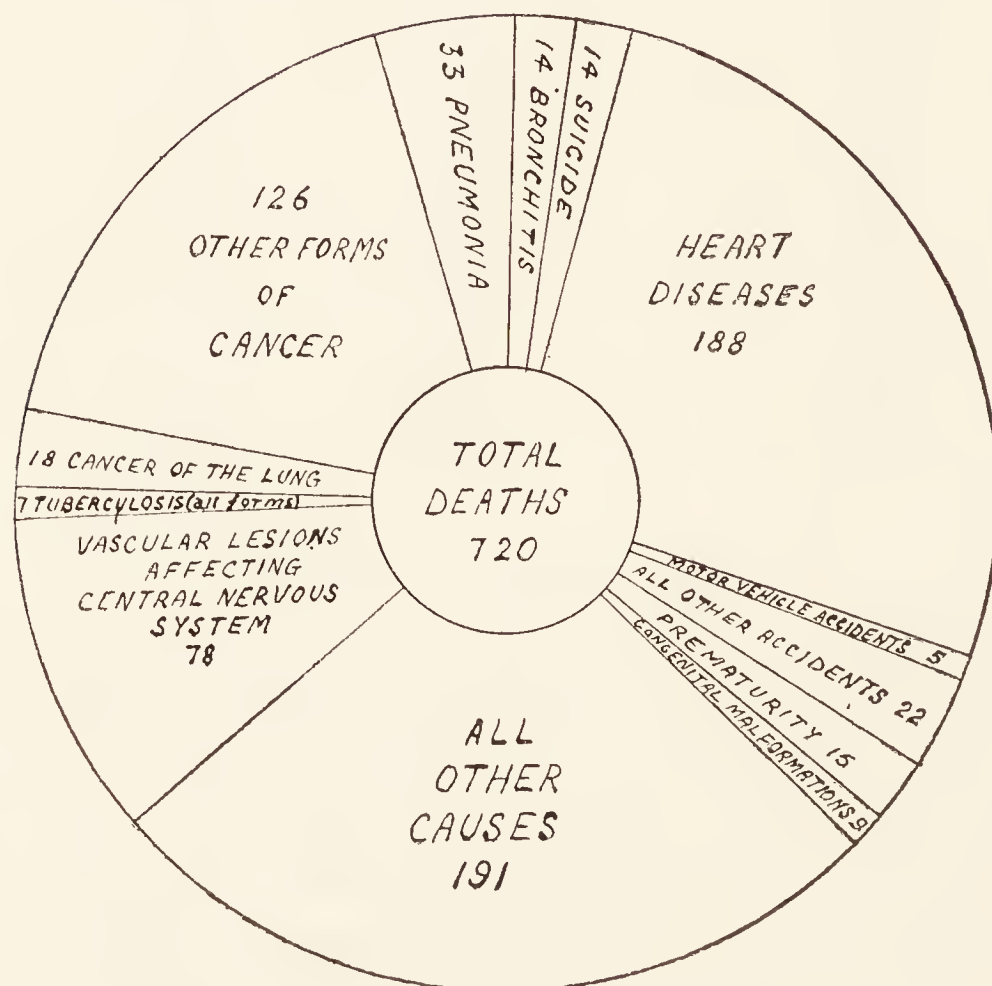
Year				Total Live Births	Birth rate per 1,000 of population.
1946	...	...	...	876	17.2
1947	...	...	...	1,018	18.9
1948	...	...	...	965	16.9
1949	...	...	...	936	16.3
1950	...	...	...	865	15.2
1951	...	...	...	844	14.8
1952	...	...	...	852	14.7
1953	...	...	...	774	13.4
1954	...	...	...	840	14.6
1955	...	...	...	736	12.9

THE DEATH RATE.

The total number of deaths registered was 720—354 males and 366 females—giving a death rate of 12.6 per 1,000 of the population. There were 734 deaths in 1954, when the rate was 12.8. The percentage of total deaths occurring at ages 65 and upward was 71.1; at ages 75 and upward 46.4. The average age at death was 67 for males and 71 for females. For comparison, in England and Wales, the percentage of deaths over 65 for 1954 was 67.4 and for 1953, 66.9.

The following table gives the percentage of deaths at ages 65 and over and 75 and over for the past ten years.

Year.				Percentage of deaths 65 and over	Percentage of deaths 75 and over
1946	...	...	...	61.9	37.4
1947	...	...	...	57.2	36.7
1948	...	...	...	59.0	33.4
1949	...	...	...	62.8	38.7
1950	...	...	...	64.2	42.4
1951	...	...	...	68.2	41.5
1952	...	...	...	69.3	43.0
1953	...	...	...	70.1	44.6
1954	...	...	...	70.0	42.4
1955	...	...	...	71.1	46.4



During the last nine years, there has been a steady rise in the percentage of deaths at 65 and over and an equally steady fall in the birth rate. Many elderly folk retire to Jersey and probably constitute the bulk of the immigrants. They do not produce children, so the birth rate per 1,000 population falls.

On the other hand, the emigration is mainly of young people at or approaching the child bearing age. This tends to reduce the birth rate. If these trends continue, it is evident that, in the near future, our deaths will exceed births.

INFANT MORTALITY AND STILLBIRTHS.

During the first year of life 25 children died, giving an infant mortality rate of 34.0 per 1,000 live births. This is the highest rate since 1946.

The deaths were distributed as follows :—

Under 7 days	15
7—28 days	3
28 days to 3 months	2
3 months to 1 year... ..	5

The neo-natal deaths, or deaths within the first four weeks of life numbered 18, or 72% of the deaths in the first year. Of these deaths, 15 were attributed to prematurity.

Recorded stillbirths numbered 14, a rate of 18.7 per 1,000 total (live and still) births, compared with 14.1 per 1,000 last year.

MATERNAL MORTALITY.

One mother died because of childbirth during 1955. The maternal mortality was therefore 1.3 per 1,000 (live and still) births.

MOTOR VEHICLE ACCIDENTS.

Five persons (all males) died as a result of motor vehicle accidents. The deaths from such accidents in the five years 1951—1955 averaged 5.8 per annum as against an average of 10.4 for the five years 1946—1950, a reduction of about 50%.

ALL OTHER ACCIDENTS.

A total of 22 persons (15 males and 7 females) died from other accidents during the year as against 8 in 1954.

Analysis of accidental deaths (automobile accidents excepted) :—

Coal gas poisoning	5
Consequent upon a fall	9
Drowning	6
Arsenic poisoning	1
Burns	1
	—
	22
	—

The average age was 61, the youngest was 7 and the oldest 86. 12 or 54.5% of these deaths occurred at ages 75 and upwards.

SUICIDES.

There were 14 deaths from suicide during the year, 9 males and 5 females. Last year there were 10 suicides. Coal gas was used in nine cases, three resorted to drowning, one to shooting and one threw himself under a double decker bus. The average age was 54. The youngest was 26 and the oldest 77.

CANCER.

As already pointed out, Jersey has a population with a high average age, because it is a favourite place of retirement. As a consequence, we tend to have a relatively high cancer death rate. During 1955, 144 people died of malignant tumours in Jersey. This gives a rate of 250 per 100,000. In 1954, the rate for England and Wales was 204 per 100,000, for Sheffield 221, for Weymouth 185, for Cambridge 218. These deaths constituted 19.6% of all deaths. The males numbered 64, the females 80. The average age at death from cancer for both sexes was 69. Cancer of the lung caused 18 deaths, 13 males and 5 females. The average age at death was 63 for males and 64 for females. They constituted 2.4% of all deaths.

TUBERCULOSIS.

The modern treatment of tuberculosis has caused a marked fall in the death rate. Last year in Jersey 7 died of this disease, 6 of whom died of respiratory tuberculosis and one of chronic tuberculous adenitis, an old lady aged 77. The death rate is the lowest so far recorded in Jersey—0.12 per 1,000. In addition, a young visitor died of tuberculous meningitis shortly after coming to the Island; her death has been transferred to her home area. The following table gives the number of deaths for 25 years, together with the rates per 100,000.

TUBERCULOSIS MORTALITY RATES
1931—1955 INCLUSIVE.

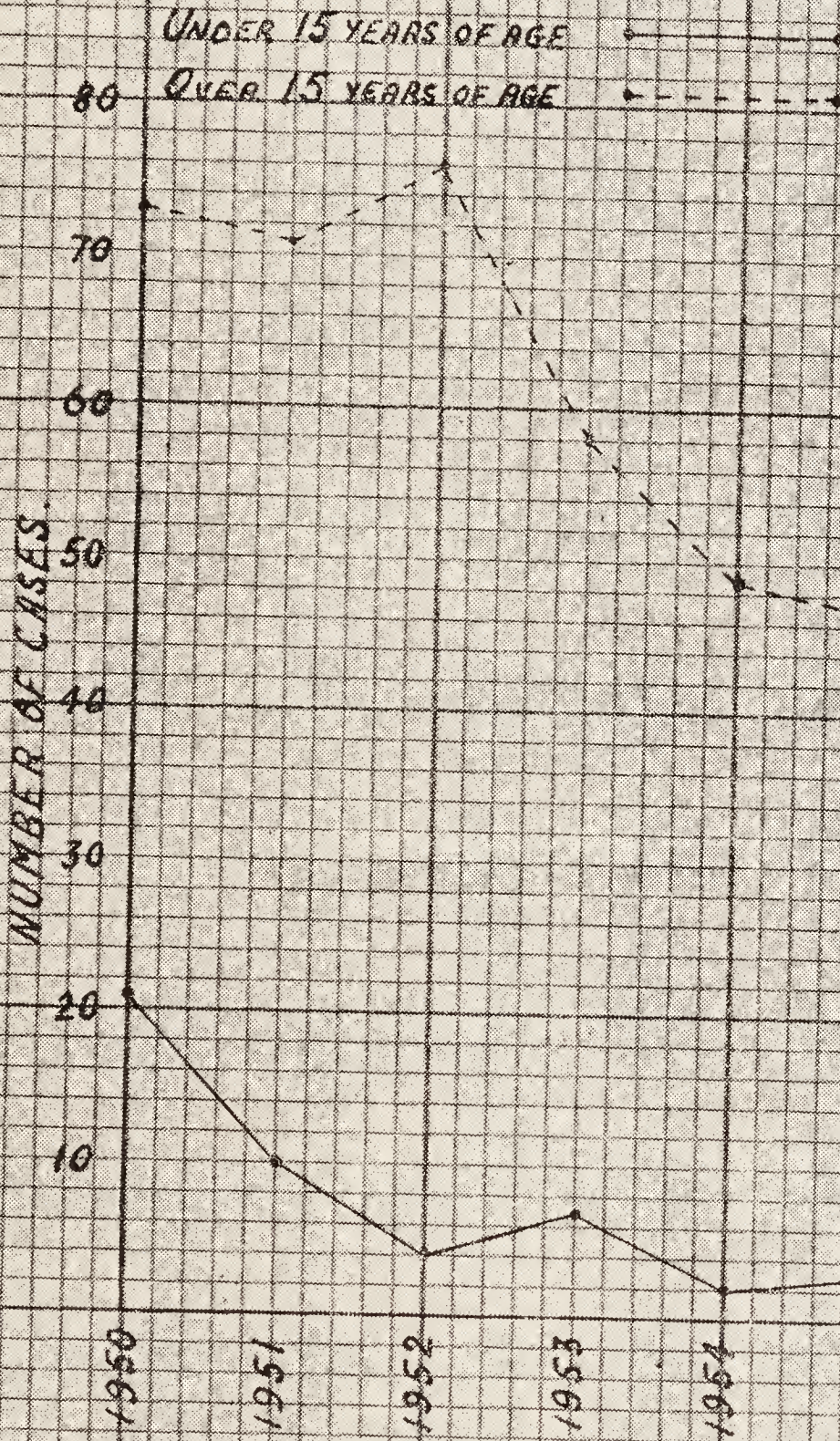
Year.	RESPIRATORY TUBERCULOSIS		OTHER FORMS	
	No. of	Rate per	No. of	Rate per
	deaths.	100,000	deaths.	100,000
1931	34	67	16	32
1932	34	67	8	16
1933	41	81	8	16
1934	51	100	8	16
1935	29	57	8	16
1936	42	83	17	33
1937	28	55	6	12
1938	26	51	4	8
1939	26	51	5	10
1940	46	112	3	7
1941	46	111	7	17
1942	48	118	4	10
1943	47	120	9	23
1944	42	108	6	15
1945	31	77	6	15
1946	24	48	3	6
1947	41	76	7	13
1948	39	68	1	2
1949	30	52	—	—
1950	19	33	—	—
1951	19	33	3	5
1952	13	22	2	3
1953	10	17	1	2
1954	17	29	—	—
1955	6	10	1	2

As the great majority of tuberculosis patients now recover, the incidence rate is a much better guide to the amount of tuberculosis in the Island. Actually 56 cases were notified during the year, but six of these were transfers from other areas, so that our local incidence during 1955 was 50, giving an incidence rate of 87 per 100,000. This rate was 167 in 1950, 143 in 1951, 143 in 1952, 112 in 1953, 89 in 1954 and 87 in 1955. Thus, in spite of all our efforts to find cases by extending the examination of contacts and the use of Mass Miniature Radiography, our incidence rate is still falling. Out of the 56 cases discovered, 17 were found by mass miniature but, of these, three were not accepted as local cases, owing to the fact that they were recent arrivals on the Island. This means that, out of 50 accepted cases, 14 or 28% were found by miniature photography.

The graph on page 27 shows the fall in the incidence rate above and below 15 years of age. The largest proportionate fall is obviously under 15.

The fall under 15 is due to our campaign for B.C.G. vaccination. During the year, a further 1,120 individuals received B.C.G., bringing the total of those vaccinated since 1949 to 11,366. Of those vaccinated during 1955, 593 were infants under 12 months, an acceptance rate in this group of 83%. The table on page 28 gives the estimated population for each year, the number and the percentage vaccinated.

INCIDENCE OF RESPIRATORY TUBERCULOSIS.



Age groups			Population	Number protected by B.C.G.	Percentage protected by B.C.G.
Under	1	...	711	593	83
1	—	2	817	653	80
2	—	3	754	558	74
3	—	4	830	584	70
4	—	5	814	629	77
5	—	6	835	338	40
6	—	7	902	468	52
7	—	8	819	641	78
8	—	9	934	718	77
9	—	10	767	650	85
10	—	11	670	570	85
11	—	12	719	571	79
12	—	13	588	457	78
13	—	14	572	465	81
14	—	15	646	510	79
15	—	16	696	516	74
16	—	17	698	504	72
17	—	18	662	489	74
18	—	19	729	472	65
19	—	20	770	337	44

The population was estimated for each year as follows :—

1 — 6 : the births minus the deaths.

7 — 14 : the actual population present in all the Island schools, States aided and private.

15 and over : from the numbers present in the schools ...when those in these age groups were schoolchildren.

It will be seen that a high proportion of our population under 20 is protected by B.C.G.

Only three cases of any form of active tuberculosis in children under 15 were notified during the year, two girls aged 6 and 5, and a boy aged 7. They were all early cases ; none had received B.C.G. Since 1949, when the B.C.G. campaign was started in Jersey, 76 children under 15 have developed tuberculosis. Of these, 75 occurred amongst the

unvaccinated and 1 amongst the vaccinated. Our campaign has indeed justified itself.

During 1956, we hope to run a campaign for the retesting and, where necessary, revaccination of all children at the age of 14.

At the same time, we hope to encourage all parents who have not already done so to have their children given B.C.G. Since the recent report of the Medical Research Council, it is no longer possible to doubt the value of B.C.G., provided that your mind is open to proof on the subject.

MASS MINIATURE RADIOGRAPHY.

A static 70 m.m. mass radiography unit was brought into action in February 1954 at the General Hospital. During the year, it was moved out of the Hospital X-Ray Department to accommodation of its own in a corner of the hospital grounds. It now has its own separate entry from Gloucester Street and it is run entirely by a separate staff. At the moment it functions between 5.30 and 6.30 p.m. on Tuesdays and Wednesdays and between 2.30—4.30 p.m. on Saturdays. The number of films taken since opening to end of 1955 is 10,273, of which 6,754 were exposed during 1955. Actually, 6,210 individuals were examined. 544 contacts and others were X-rayed twice during the year. We now X-ray every contact soon after the discovery of the index case and again three months later. Miniature radiographs were made of 6,210 individuals. 247 of these (39.7 per 1,000) were recalled for a large film and 17 of these (2.7 per 1,000) were found to be suffering from active pulmonary tuberculosis. A further 52 (8.4 per 1,000) had evidence of old disease and were placed under observation.

Of the 17 active cases, 7 came from the self-applicant group, an incidence of 2 per 1,000 ; 4 from cases referred by doctors, an incidence of 8.4 per 1,000 ; 1 came from the contact group, an incidence of 1.3 per 1,000 ; and 5 were aliens, an incidence of 3.8 per 1,000. Of the 5 aliens, 4 were repatriated.

At the time of writing, we are taking over 200 70 m.m. films each week and there are signs that the set is becoming a local institution. We hope, by further propaganda efforts, to increase its usefulness and bring nearer the day when tuberculosis will have become an unpleasant memory. We will do our best. It is up to the public to help us.

OVERDALE.

The treatment of tuberculosis is rapidly changing. The emphasis is now on chemotherapy and surgery. It has become possible to treat cases with minimal lesions on an ambulatory basis with drugs alone, provided that they are non-infective and cut out all unnecessary activities. We have actually carried out treatment on these lines for three such cases during the past year. The results so far are good. The more advanced case still requires rest in bed and I have no doubt in my own mind that this is best carried out in a sanatorium. The chemotherapy now tends to be prolonged for a year, two years or even longer, though it is quite unnecessary for patients to remain in a sanatorium for that period as their physical condition rapidly improves and they become non-infective. Every case has to be treated on its merits, taking the extent of the disease, the home condition of the patient and, last but not least, the temperament of the patient into consideration. The last is very important and, alas, it is only too often that a discontented, irritable patient wrecks his or her treatment by his or her behaviour.

MASS MINIATURE RADIOGRAPHY.

		Min. X-rays.		Passed on Min. film.		Recalled for large film.		Passed on large film.		Treatment Cases.		Cases for observation.		OTHER SIGNIFICANT ABNORMALITIES.							
		Totals to date.		Totals to date.	% of total X-rays to date.	Totals to date.	% of total X-rays to date.	Totals to date.	% of total X-rays to date.	Totals to date.	% of total X-rays to date.	Totals to date.	% of total X-rays to date.	Cancer		Heart		Cervical Ribs		Other lung diseases	
		Grand Total	Repeat											Totals to date.	% of totals X-rays to date.	Totals to date.	% of total X-rays to date.	Totals to date.	% of total X-rays to date.	Totals to date.	% of total X-rays to date.
Self Applicants	M	1571	959	1534	97.64	37	2.36	23	1.46	4	.25	9	.57	1	.06	—	—	—	—	1	.06
	F	1859	1020	1800	96.83	59	3.17	46	2.47	3	.16	6	.32	—	—	2	.11	7	.38	—	—
Doctors' Cases	M	218	1	193	88.53	25	11.47	17	7.80	1	.46	6	2.75	—	—	1	.46	1	.46	—	—
	F	260	1	222	85.38	38	14.62	22	8.46	3	1.15	10	3.85	—	—	1	.38	2	.77	1	.38
Contacts	M	719	311	693	96.38	26	3.62	19	2.64	1	.14	5	.70	—	—	1	.14	1	.14	—	—
	F	383	158	364	95.04	19	4.96	11	2.87	—	—	8	2.09	—	—	—	—	—	—	—	—
Tuberculin Positives	M	96	71	93	96.87	3	3.13	1	1.04	—	—	2	2.08	—	—	—	—	—	—	—	—
	F	121	86	120	99.17	1	.83	1	.83	—	—	—	—	—	—	—	—	—	—	—	—
Aliens	M	941	128	916	97.34	25	2.66	16	1.70	4	.43	5	.53	—	—	—	—	3	.32	—	—
	F	569	78	555	97.54	14	2.46	10	1.76	1	.18	1	.18	—	—	3	.53	—	—	—	—
Hospital	M	10	—	10	100.00	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	7	—	7	100.00	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	M	3555	1470	3439	96.74	116	3.26	76	2.14	10	.28	27	.76	1	.03	2	.06	5	.14	1	.03
	F	3199	1343	3068	95.90	131	4.10	90	2.81	7	.22	25	.78	—	—	6	.19	9	.28	1	.03

6,210 individuals were X-rayed. 544 of these were X-rayed twice during the year, making a total of 6,754 films.

The falling incidence rate is making possible the use of beds at Overdale for convalescence of patients from the General Hospital.

OVERDALE STATISTICS 1955.

ADMISSIONS TO HOSPITAL.

TUBERCULOSIS

Pulmonary tuberculosis	77	
Tuberculosis Peritonitis	2	
Tuberculosis Laryngitis	1	
Tuberculosis Abcess	1	81
	<hr/>	

INFECTIOUS DISEASES

Measles	5	
Chicken Pox	2	
Vaccinia	2	
Mumps	1	
Diphtheria	1	
Whooping Cough	1	
Unconfirmed Para Typhoid	2	
Lobar Pneumonia	1	
Measles Contact	1	
Investigation	2	18
	<hr/>	

DEATHS

Pulmonary Tuberculosis	2	
Measles	1	3
	<hr/>	

DICHARGED FROM HOSPITAL

Tuberculosis	82
Infection, etc.	18
Number of patients fit for normal work after suitable convalescence... ..	56
Number of patients sent to England for surgery	7
3 patients rapatriated to France.	
1 patient repatriated to Switzerland.	
Of the total number of tuberculosis admissions, 21 were return cases.	
13 patients left before completing their treatment.	

OUT-PATIENTS

1955 NUMBERS.

New cases	300
Routine check	932
Refills	724

INFECTIOUS DISEASES.

Measles.

365 cases of measles were notified during the year. All except 5 were nursed at home. One of the 5 was a case of malignant measles in an elderly woman debilitated from other ailments. She died. There were no other deaths from measles.

Poliomyelitis.

There were 37 notifications of acute anterior poliomyelitis. Of these, 28 were confirmed. 18 cases developed paralysis. 10 were non-paralytic. 2 cases died. The epidemic was smaller and with fewer cases of severe paralysis than that of 1949. The great majority of the cases occurred during July and August. The "iron lungs" were not used.

Smallpox.

Early in January 1955, we heard rumours of an outbreak of smallpox in the Vannes area and official confirmation of this was received on 14th January. The first case occurred at the beginning of December 1954 in an unvaccinated child aged 1 year. The child's father had returned 10 days previously from military duties in Indo-China, where he had been in a hospital in which cases of smallpox were being treated. Up to the 8th January 1955, there had been 25 cases with 2 deaths. By 12th January, the total number of cases was 40 with 4 deaths.

At Christmas and the New Year, many French farm workers take a holiday and return to their homes in Brittany. We found that quite a number had returned from the area around Vannes.

A list of these returned workers was obtained from the Aliens Office. They were visited, vaccinated and kept under observation. At the same time we instituted a system of meeting all boats and planes from France and offering vaccination to all who had not been recently vaccinated. The addresses to which they were going in Jersey were noted. Some were passing through to addresses in England. In such cases we took the addresses to which they were going and notified the Medical Officer of Health of that area.

Chickenpox was made notifiable for the emergency and all cases were seen by myself or Dr. Darling. We asked that, in addition, we might be informed of any illness, of whatever nature, occurring in any person less than 14 days after their return from France. Whilst we received reports through official channels of the progress of the epidemic, we found that newspapers published in Brittany were our best sources of information.

Owing to our unvaccinated state, a notice was placed in the "Evening Post" advising the population to be vaccinated or revaccinated. This vaccination was carried out by general practitioners, by the General Hospital, by the school medical service and at the Maternity and Child Welfare Clinics. A total of 29,430 persons were vaccinated, 25,828 by medical practitioners, 3,288 by Dr. Darling in the schools and 314 by the Maternity and Child Welfare service.

All the staff of the department were vaccinated or revaccinated and a rule was made that all future employees of this Department should be vaccinated as a condition of employment. For some days the office was swamped with work but everybody gave of the best, with no consideration for office hours, overtime or anything other than getting the work done.

No case of smallpox occurred in the Island. One case would have destroyed the visitor trade for at least one season. I think, under the circumstances, our efforts were justified and now a far higher percentage of our population is vaccinated. There were naturally a large number of severe reactions as many of our adolescents and adults had never been vaccinated before or not since birth.

If everyone was vaccinated at birth and again on leaving school, there would be few serious reactions and life would be much safer in this contracting world. A man can leave an Indian bazaar and be in Jersey in three days. The incubation period of smallpox is 12 days. Jersey has many residents with relations in areas where smallpox is endemic. Vaccination in infancy is still desirable and will save your children from the possibly serious complications of vaccination in adolescence, should the necessity for such a measure arise again.

DIPHTHERIA.

One very mild case of diphtheria was admitted to Overdale. This child had arrived from Guernsey during the previous 24 hours and can hardly be considered an indigenous case. This is the only notified case since 1950. Our immunisation figures are still high and, at school age, they read nearly 80% of the population. Our immunisation work is done entirely by the district nurses, the infant welfare service and the school medical service. 410 primary immunisations and over 1,500 booster doses were notified to this office during the year.

SCHOOL MEDICAL INSPECTION.

During 1955, 2,755 school children were medically examined. 2,425 of these were in States' schools and 330 were in private schools.

2,374 children were recorded as having one or more defects, the total of defects being 4,267.

Dental Defects

1,547 (56%) of those examined were in possession of untreated carious teeth. Last year the figure was 57% so it is possible that the position is stable at this figure. The one comfort of having reached rock-bottom is that you cannot fall any further.

The incidence of those with untreated dental caries varied from 71% in group I (6 year olds) and 74% in group II (9 year-olds) to 42% in group III (12 year-olds) and 31% in group IV (15 year-olds and upwards).

It must be emphasised again that these figures apply only to the presence of untreated carious teeth. To compute the total damage done by dental decay, the numbers of teeth that have been extracted or filled should be added to the number noted as decayed. This "decayed" "missing" and "filled" figure, called DMF for short, is being noted during 1956 for children in 2 age groups (1) those who are in their 6th year of life and (2) those who are in their 15th year. The first group covers the primary dentition and the second group covers the permanent dentition. Figures are available for these two age groups in different parts of England, and it will be interesting to compare the Jersey DMF figures with the English ones. A preliminary survey made in 1955 in 5 year-olds suggests that the position in Jersey, as regards the actual amount of decay occurring, is as bad if not worse than that in England. As the amount of treatment here is very much less than that available in England or Guernsey, it should not come as a surprise to learn that the worst mouths in the British Isles are to be found in Jersey. I know of no other area in the British Isles that does

not provide a full time dental service for its children's teeth. It is true that private dental treatment is available but the question of cost means that many must go without. If we compare the treatment figures available for children attending the Colleges or private schools and children attending the States primary schools, we find that the private school children receive 15 times as much conservative treatment as do the others. As a result, though both types of children sustain the same amount of decay, the well-to-do minority end up with much better mouths than their poorer brothers and sisters. To provide anything like an adequate service for Jersey children, 20 dental sessions a week are required, but only three are provided.

Orthopaedic Defects.

Orthopaedic defects recorded during 1955 amounted to 1,951, of which 708 were due mainly to round shoulders, knock knees and various toe deformities. The remaining 1,243 orthopaedic defects all come under the heading "flat feet" but it should be noted that half or more of these had only a tendency towards this condition. They were, however, recommended the same treatment as the others as the prevention of a dropped longitudinal arch is easier than its cure.

The primary fault in the great majority of these feet lies in the position of the ankle which is rolled inwards in a valgus deformity. Restoration of the ankle to its right position brings up the arch to its normal level in nearly every instance, but keeping it there is a matter of training and habit. This training is done to some extent in the schools and also in the home, diagrams of exercises having been supplied to all parents concerned. Facilities for footwork vary from school to school but, as a rule,

they are poor in the junior school where the incidence of " flat feet " is high (54%) and good in the senior schools where the incidence is lower (36%). As preventive and corrective work pays the highest dividends when begun early in life and as time in the curriculum for footwork is more easily obtained in a junior school than in a senior one, it seems a pity that better facilities could not be provided where they are most needed. Correct posture of feet and body is fundamental in physical education and its ensurance and maintenance should have priority over all other forms of training.

In this connection I would like to record the deep interest taken in this problem by Mr. E. R. Holmes, the Organiser of Physical Education. He has done much in every type of school to improve the standard of foot work and all improvements, both in the interest shown and the facilities provided, stem directly from his efforts. In addition to this routine work, he organised during the year an admirable foot health exhibition and demonstration. This was open first of all to the public and then culminated in an afternoon devoted to a demonstration and discussion attended by those members of school staffs who are directly concerned with physical education. This afternoon session was also attended by the Committee responsible for the administration of the Westaway footwear fund and their immediate and energetic response to what they saw and heard has resulted in a great improvement in the fitting and quality of footwear supplied through the fund.

Eye Defects

The school medical inspection continues to provide a means of detecting imperfect vision and 135 new cases were referred in 1955 for a further opinion. The new types of frame now available are, as far as

appearance goes, a great improvement on the old type which had circular steel rims. As a result the opposition that used to exist amongst girls to the thought of wearing glasses has almost vanished and in some girls' schools, the tendency is now in the opposite direction, in that some children, who prove to have normal vision, are submitting themselves for a sight test in the hope that they may have to wear glasses. This tendency has not yet been noted amongst the boys and they are still reluctant to change their appearance by starting to wear glasses.

New cases of squint referred during the year numbered 32, an incidence of 11.6 per 1,000 children seen. This is much the same figure as last year. No type of case demands so much co-operation on the part of child, parents and school staff as a case of squint, if the treatment prescribed is to be carried through to a successful conclusion. Despite the efforts of all concerned, some children refused to obey the instructions given at the orthoptic clinic and their treatment has had to be abandoned as a result.

Heart Cases

24 cases were referred during the year and most of these eventually found their way to the cardiology clinic run by Dr. Richard O'Meara. His reports on each child continue to give invaluable guidance regarding the degree of activity to be permitted at school.

Immunology.

"Booster" doses against diphtheria and, in the case of many infants, against diphtheria and whooping cough, were given to many of the children seen. Most of these injections are given during the inspection but, in a few of the schools, the nurse prefers to give them a short time later.

In the case of infants it was disturbing to note that quite a number were being immunised for the first time.

Vaccination against smallpox has, on the whole, been regarded with indifference in the past in Jersey and, up to 1955, less than 20% of school entrants had been done. During the end of 1954 and in the early months of 1955, an extensive outbreak of smallpox occurred in Brittany. As much French labour comes to Jersey from this area and as there is quite a degree of contact between two populations, wholesale vaccination of the Jersey population was advised. Within a period of 3 weeks, more than 90% of our school population was vaccinated, by far the greater part being done for the first time. Over 3,000 of these vaccinations were done in the schools by the staff of the school medical service at a cost of considerable disruption of the medical inspection programme. As most of these vaccinations were primary ones, the reactions ensuing were substantial and caused quite a bit of absenteeism amongst staff and pupils. The mildness of the reactions occurring in those who had been vaccinated before was in marked contrast and spoke volumes in favour of routine vaccination in infancy.

The absence of clinical tuberculosis amongst those vaccinated with B.C.G. continues to be a modern marvel, so during the year, an attempt was made to change the minds of all parents whose children had not yet been submitted for this form of anti-tuberculosis vaccination. Not all responded but some did and it is a relief to record that another 450 school children have been placed under the protecting wing of B.C.G.

Weights and Heights.

Every 5 years, a full survey is made of the weights and heights of all children attending States schools.

The figures this year include the Colleges and it should be noted that all children were weighed, stripped to vests and shorts. In other years, the children were fully clothed, apart from footwear. In spite of this, the figures are an improvement on those recorded in 1950. This improvement is most marked in those aged 10 to 15. Two new lever balances of a very accurate type were available for all schools that did not possess anything better than the old spring balances that are now more than 20 years old. The tables giving the figures since 1930 are set out below :—

BOYS' WEIGHTS

			1930	1935	1940	1943	1945	1950	1955
			—	—	—	—	—	—	—
6	...	...	45.9	45.3	46.1	44.6	47.0	48.5	45.8
7	...	...	49.8	50.1	49.2	46.9	50.9	52.9	51.2
8	...	...	54.3	53.3	55.9	52.4	55.7	53.8	56.8
9	...	...	60.3	60.4	60.7	56.7	59.4	63.7	62.5
10	...	...	65.4	66.4	66.2	61.3	64.4	68.8	72.8
11	...	...	71.3	69.4	73.9	67.5	70.9	75.3	76.9
12	...	...	76.4	79.7	76.8	72.1	75.2	81.2	84.0
13	...	...	83.2	85.3	83.8	78.3	82.6	84.8	93.2
14	...	...	92.0	94.3	92.7	85.5	93.8	98.4	102.5
15	...	...	—	—	—	94.4	98.8	106.6	115.2
16	...	...	—	—	—	—	—	—	130.5
17	...	...	—	—	—	—	—	—	141.4
18	...	...	—	—	—	—	—	—	144.3
19	...	...	—	—	—	—	—	—	145.0

BOYS' HEIGHTS

			1930	1935	1940	1943	1945	1950	1955
			<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
6	...	...	44.8	44.8	44.5	44.9	45.0	45.3	44.8
7	...	...	46.5	46.8	46.8	46.3	46.9	47.7	47.5
8	...	...	48.9	47.4	50.6	48.4	48.7	49.3	49.4
9	...	...	51.6	50.8	50.9	50.0	50.3	51.6	51.4
10	...	...	52.7	52.9	52.6	51.9	52.0	53.1	53.6
11	...	...	54.2	54.4	54.4	53.7	53.8	55.1	55.7
12	...	...	55.2	56.4	56.1	55.5	54.9	56.8	57.7
13	...	...	57.5	58.5	58.1	57.1	57.0	58.6	59.0
14	...	...	59.5	60.3	60.1	58.7	59.3	60.9	61.8
15	...	...	—	—	—	60.7	61.1	63.0	64.5
16	...	...	—	—	—	—	—	—	67.0
17	...	...	—	—	—	—	—	—	68.3
18	...	...	—	—	—	—	—	—	69.5
19	...	...	—	—	—	—	—	—	66.3

GIRLS' WEIGHTS

			1930	1935	1940	1943	1945	1950	1955
			<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
6	...	...	44.9	43.3	44.7	43.0	43.8	46.7	46.1
7	...	...	47.4	48.3	47.9	46.5	48.8	51.2	51.5
8	...	...	52.6	52.4	53.7	52.5	54.3	56.4	56.2
9	...	...	57.7	62.0	60.0	56.1	60.4	61.4	62.8
10	...	...	66.6	64.6	64.5	61.4	65.1	67.9	68.6
11	...	...	71.6	72.1	71.6	66.7	72.7	73.8	76.4
12	...	...	77.1	83.1	79.6	74.2	77.4	81.3	88.3
13	...	...	89.1	90.7	90.6	81.3	89.0	93.9	98.6
14	...	...	95.6	98.2	98.4	95.8	100.5	108.5	107.5
15	...	...	—	—	—	101.7	105.7	114.4	113.6
16	...	...	—	—	—	—	—	—	121.0
17	...	...	—	—	—	—	—	—	124.0
18	...	...	—	—	—	—	—	—	124.9

GIRLS' HEIGHTS

			1930	1935	1940	1943	1945	1950	1955
6	...	...	44.6	44.1	44.5	44.2	44.4	44.8	45.2
7	...	...	46.1	46.2	46.4	46.0	46.2	47.0	47.1
8	...	...	48.4	47.5	48.8	48.6	48.2	49.0	48.8
9	...	...	51.0	50.5	50.8	50.3	50.2	50.6	51.0
10	...	...	52.5	52.6	52.8	52.0	52.0	52.5	54.0
11	...	...	55.0	54.9	54.6	53.7	54.0	53.9	55.1
12	...	...	56.5	56.9	57.0	56.0	55.6	56.5	58.0
13	...	...	58.9	58.7	59.6	57.6	57.8	59.2	60.0
14	...	...	60.9	61.4	61.2	60.7	59.6	61.2	61.0
15	...	...	—	—	—	61.4	60.5	63.3	62.3
16	...	...	—	—	—	—	—	—	64.0
17	...	...	—	—	—	—	—	—	63.5
18	...	...	—	—	—	—	—	—	62.8

As can easily be visualised the fitting in of so many special visitations into the school curriculum is not an easy task and my very sincere thanks are due to the school principals who showed us such unfailing kindness and co-operation during a year in which the interruptions to be endured were more than usual. Apart from the routine school medical inspections, there were vaccinations and revaccinations in January and February, a B.C.G. campaign in the summer term and, as a substantial last straw, the quinquennial survey of heights and weights during the autumn term. Many of the principals concerned have no clerical assistance and, though every effort was made in this office to reduce the paper work entailed in the schools to a minimum, I am afraid that the school medical visits still added a considerable burden to the long suffering principals.

Thanks are also due for much work done by the Health Office staff in connection with the vaccinations, the B.C.G. campaign and the weights and heights survey, and a final tribute to the new school medical clerk who has tackled her new job in a most admirable fashion.

MEDICAL INSPECTIONS 1955.

Number of children examined				Number with defects	
Group	I.	(5—7 years) ...	...	727	673
Group	II.	(9 years) ...	...	729	677
Group	III.	(12 years) ...	...	587	468
Group	IV.	(15 years and school leavers) ...	...	588	446
Group	V.	(Special cases and re- examinations) ...	...	124	110
TOTAL : ...				2,755	2,374
Number of children absent from inspections ...				...	126
<i>Hearts</i> —Number of children referred for further opinion				...	24
<i>Squints</i> —Number of children referred for further opinion				...	32

SUMMARY OF DEFECTS FOR 1955.

(O=defect requiring observations; T=requiring treatment; R=reference to specialist).

	Group I			Group II			Group III			Group IV			Group V			Total
	O	T	R	O	T	R	O	T	R	O	T	R	O	T	R	
Cleanliness	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Head	—	—	—	—	3	—	—	1	—	—	—	—	—	—	—	4
Body	—	6	—	—	3	—	—	—	—	—	—	—	—	—	—	9
Teeth	1	519	—	—	544	—	1	248	—	—	185	—	—	49	—	1,547
Skin.....	22	1	3	12	1	2	4	1	3	2	1	1	1	—	—	54
Eyes																
Vision	3	—	14	3	—	46	3	—	39	4	—	48	—	—	6	166
Squint.....	14	—	10	11	—	7	—	—	5	3	—	4	1	—	6	61
Other	6	—	—	12	—	—	6	—	—	10	—	—	2	—	—	36
Ears																
Hearing	3	—	1	8	—	—	3	—	—	—	—	—	—	—	1	16
Otitis Media	25	—	1	13	—	1	7	—	—	2	—	—	—	—	—	49
Other	39	—	1	30	3	1	13	1	2	18	3	5	6	—	1	123
Nose or throat	27	—	5	12	—	4	4	—	2	3	—	1	5	—	2	65
Speech	2	—	—	—	—	1	1	1	—	—	—	—	—	—	—	5
Cervical Glands	17	—	—	10	—	1	3	—	—	—	—	—	—	—	—	31
Heart and Circulation	24	—	5	11	—	4	6	—	2	3	—	9	1	—	4	69
Lungs	3	—	—	3	—	—	—	—	—	2	—	—	—	—	—	8
Development																
Hernia.....	3	—	1	1	—	1	1	—	—	—	—	—	—	—	—	7
Other	8	—	—	3	—	—	6	—	—	2	—	—	1	—	—	20
Orthopaedic																
Posture	9	15	—	12	29	—	5	25	3	13	16	1	6	5	—	139
Flat foot	—	379	—	—	402	—	—	256	—	—	171	—	—	35	—	1,243
Other	10	158	2	22	125	—	66	48	1	98	16	2	6	14	1	569
Nervous System																
Epilepsy	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Other	1	—	—	2	—	—	—	—	—	—	—	—	1	—	—	4
Development	1	—	—	—	—	—	—	—	—	2	—	—	—	—	—	3
Stability	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Asthma	12	—	—	11	—	—	3	—	—	3	—	—	2	—	—	31
Mouth.....	2	—	—	—	—	—	1	—	—	1	—	—	—	—	—	4
Anaemia	—	—	—	1	—	—	—	—	—	2	—	—	—	—	—	3
TOTAL.....	233	1078	43	177	1110	68	133	580	57	169	392	71	32	103	21	4,267

FOSTER CHILDREN

Total number of registered foster homes	93
Total number of new permits issued	38
Total number of foster children during 1955 ...	145
Total number of foster children in foster homes, 31st December, 1955	105
(1) Boarded out privately	41
(2) Boarded out by parishes	56
(3) Education Committee	7
(4) Transfer from England	1
New children boarded out	49
(1) Privately	25
(2) All parishes	23
(3) Transferred from Oxfordshire County Council—payment from Oxford	1
Children ceasing to be foster children during year	40
(1) Returned to parents	32
(2) Over age, <i>i.e.</i> 14 years	3
(3) Transferred to Institutions	2
(4) Returned to England	1
(5) Adopted by foster parents	1
(6) Died	1

The work has steadily increased but still new foster homes are urgently required. Short stay homes are particularly needed for emergency situations, *e.g.* where the mother of a young family has to enter Hospital.

Between the months of May and October, we were inundated with applications from French workers who were eager to place their children, too young to accompany them into the fields, in foster homes. Unfortunately, there were insufficient foster homes. We fear that many were placed in unregistered homes unknown to the Department, contrary to the Law and, therefore, were without supervision.

There is a great need for either a residential or Day Nursery for children of mothers who work, particularly during the season.

Under the present Law, a child attaining the age of 14 years ceases to be a foster child. The problems

of some of these adolescents are still much in evidence and provision for help and advice are very necessary. The advantages of placing children in suitable foster homes are not fulfilled unless adequate supervision is available where it is needed between the ages of 14 and 18 years.

OLD PEOPLE BOARDING-OUT SCHEME.

Total number of infirm and elderly persons boarded out 1955...	...	...	...	...	...	...	...	19
Returned to institution	...	...	...	...	...	...	...	1

This scheme is as yet in its infancy but, to date, is proving helpful to several different categories of people. For example :

An elderly couple who were in-patients of the General Hospital Medical Wards were, on discharge, both physically and mentally unable to maintain their own home. They were boarded out together in a private house, where they are able to pursue their lives in comfort and with adequate care and attention. If the scheme had not been in operation, this old couple would probably have been separated and placed in institutions.

A mentally retarded and slightly physically handicapped man, who had spent his entire life in the Poor Law Department of the General Hospital was boarded out with an understanding family, where he has been able to lead a fuller life and has been able to take up light employment of a suitable nature.

Financial arrangements for boarding out include a grant from the Committee, supplemented by assistance from the Constable of the appropriate Parish and Old Age Pensions, when available. A sum of £1,000 was voted by the States for this purpose.

It is hoped that this scheme will both help the needy individual and relieve the pressure on Institutions where beds are required for the more chronic sick and those people who need active nursing care.

SANITARY INSPECTION.

The valuable report of Mr. L. Hammond, Chief Sanitary Inspector, is attached. Again, the inspection of sites, housing plans, discussion with builders, architects, plumbers etc. take up much of the time of this section of the department. The boom in housebuilding continues. Still, a cursory glance through the report will indicate that the other work of general inspection, inspection of slum property, milk inspection, taking of water samples etc. is not being neglected.

It seems a pity that real slum clearance is not being attempted. I would like to see the people from a slum area put into decent houses, the slum areas cleared and decent houses or flats built in their stead, to which a further section of slum dwellers could be moved and another area cleared. Perhaps some day it will be done but it will never be done at a profit. Housing for the very poor is a form of social insurance for the community and will give returns in health and happiness but not in money.

JERSEY DISTRICT NURSING ASSOCIATION.

The District Nurse still carries on her invaluable work. She is a domiciliary nurse, tending to patients in their homes, bed bathing old people, giving penicillin injections and acting as a valued nursing assistant to the medical practitioner. She is a midwife, and a good one at that, even if now much of this work has been transferred to the Maternity Hospital; the District Nurse, however,

still does about 30% of the work. The old unqualified "sage femme" is now unknown. The District Nurse is also a school nurse, helping at school medical inspections, and following the child to its home to encourage the parents to have any necessary remedial treatment carried out. She is a public health nurse carrying out immunisation against diphtheria, whooping cough and tetanus. In fact, they do everything which they are asked to and more. They are an invaluable social institution.

THE JERSEY MATERNITY AND INFANT WELFARE CENTRE.

The work of this society was handicapped for part of the year as there was only one health visitor for a few months. Now a new health visitor has been appointed and the work is gathering momentum again. They carry out many immunisations and Drs. Brommage and Fahey give much useful advice to mothers and carry out much work in connection with our B.C.G. campaign. I thank them for their help.

JERSEY HOME HELPS SOCIETY FOR THE SICK AND AGED.

This society is now in a somewhat better financial position. They employ 14 home helps on a part time basis and give about 40 hours work weekly to help old people. I would like to see this society in a still better position and able to expand its work.

I wish to thank Dr. A. S. Darling for his excellent report on school medical inspection and for his valuable assistance at all times. To Mr. Hammond, the staff of Inspectors, and indeed every member of my office, I record my appreciation of their loyalty and good work.

R. N. McKINSTRY,
Medical Officer of Health.

ANNUAL REPORT OF THE CHIEF SANITARY INSPECTOR.

I have the honour to submit my thirty-second Annual Report, for the year 1955, on the many and various subjects appertaining to the duties of a Sanitary Inspector, such as inspections in connection with housing, licensed premises, guest houses, restaurants, cafés, food preparation and supply, clean milk production, building sites, alterations to premises, plan approvals, water supply, rodent control, including control on ships, disinfection, etc.

GENERAL SUMMARY OF INSPECTIONS, Etc.

Four thousand six hundred and seventy-five inspections, re-inspections, appointments, visits for works in progress were made of houses, hotels, restaurants, cafés, bakehouses, food shops, dairies, schools, camping and building sites, movable dwellings, brooks, etc.

There were two thousand nine hundred and fifty-three callers for advice, complaints, etc., all of which received attention.

Five hundred and sixty-nine smoke and water tests were applied to new drainage and existing systems.

WATER SUPPLY.

Samples taken for :—

	Satisfactory.	Unsatisfactory.	Total.
	<hr/>	<hr/>	<hr/>
Chemical analysis	59	51	110
Bacteriological examination.....	66	39	105

Sources sampled.	No.	Satis- factory.	Unsatis- factory.	Improved.	Con- demned.
Wells	93	49	44	5	3
Springs ...	3	1	2	—	—
Streams ...	5	—	5	—	—
Rainwater storage ..	5	1	4	—	—
Bore tubes.	1	1	—	—	—
Treated supplies.	1	1	—	—	—
Jersey New Water- works ...	2	2	—	—	—
Number of samples which contained excessive lead.....					6
Number of samples which contained excessive copper.....					2
Number of samples which contained excessive zinc.....					13
Lead fittings removed from wells, etc.					4
Number of samples from swimming pools					7

IMPROVEMENTS TO DWELLING HOUSES.

Houses provided with new sanitary facilities.....	54
Farmhouses provided with new sanitary facilities.....	25
Houses supplied with Waterworks services	9
Number of houses re-conditioned	19
Improvements to dwelling houses such as cleansing, dis- tempering, plastering, new windows, doors, additions, etc.	23
Overcrowding abated	1

DISINFECTIONS AND DISINFESTATIONS.

Number of rooms disinfected for infectious diseases	202
Number of bundles of bedding and clothing disinfected...	197
Number of mattresses disinfected	198
Number of rooms disinfested (bugs, fleas, etc.)	380
Number of books disinfected	26

DETAILS OF DWELLING HOUSES WHICH HAVE
UPON REPORT BEEN CONDEMNED AND CLOSED BY
ACT OF THE COMMITTEE AS BEING UNFIT
FOR HUMAN HABITATION.

Number of houses condemned.	Position.	Date of Report.	Result of Action taken.
1.	Grosnez Bungalow, Grosnez Point, St. Ouen.	16.3.55.	Still occupied.
1.	27, Garden Lane, St. Helier.	30.3.55.	Being re-condi- tioned.
1.	Beauchamp, St. Peter's Valley.	20.5.55.	Vacated.
1.	2 basement rooms at 15, Grenville St., St. Helier.	1.6.55.	Vacated.
1.	No. 4, Victoria Cottages, Grève d'Azette, St. Cle- ment.	11.7.55.	Still occupied.
4.	Cottages, 1—4, No. 20, Charles St., St. Helier.	3.9.55.	Still occupied.
1.	3, Pier Road, St. Helier.	27.10.55.	Still occupied.
10.	2 hutments, La Haule Camp, St. Brelade.	17.12.55.	9 still occupied
2.	30 & 32, Pier Road, St. Helier.	29.12.55.	Still occupied.
Total number of houses condemned.....			22

CLOSING ORDERS RESCINDED AFTER PROPERTIES BEING COMPLETELY RE-CONDITIONED.

Number of Houses.	Position. ——	Closing Order.	Rescinded. ——
1.	Les Grès Cottage, Victoria Village, Trinity.	17.12.54.	26.5.55.

Total number of Closing Orders rescinded 1

Between 1923 and 1955, four hundred and sixty houses were condemned or closed by Acts of the Committee as being unfit for human habitation.

SUMMARY OF WORK IN CONNECTION WITH THE LAW ON PUBLIC HEALTH, 1934, AS AMENDED.

One thousand one hundred and twenty-eight plans were submitted for examination and one thousand one hundred and twenty-one were approved.

Thirty-two plans were on report rejected by the Committee as being unsatisfactory.

The following table gives a description of the plans approved:—

Bungalows	181
Houses	65
Farmbuildings, stores, etc.	43
Garages, greenhouses, etc	327
Alterations, additions and extensions to dwellings	555
Flats	136
Hotels.....	1
Shops	12
Licensed premises.....	4
Chapels	1
Classrooms	2
Mission halls	1
Public conveniences.....	5
Laundries	1
Miscellaneous plans	27

One hundred and fifty-six dwelling houses, bungalows, flats, etc., were to be newly connected directly or indirectly to the main sewers, and one hundred and fifty were to be drained to modified sewage disposal plants. These figures include 18 flats, between Valley Road and Trinity Gardens, St. Helier ; 12 flats, Le Geyt Road, St. Saviour ; 5 blocks of flats, Landscape Grove, Mont Cochon ; 9 flats and stores, First Tower, St. Helier.

It should perhaps be emphasised that this table does not relate to any work done other than by plan submitted under the Law on Public Health.

LICENSED PREMISES.

The following table gives details of inspections and improvements effected to these premises including plans where related to sanitary accommodation, etc.

1.	Number of premises dealt with.....	27
2.	Inspections and re-inspections.....	49
3.	Interviews with owners' representatives.....	17
4.	Additional water closets provided	13
5.	New urinals provided	4
6.	New drainage provided.....	9
7.	New bar sinks provided	5
8.	Water supply connected to bar sinks	5
9.	Wash-basins provided	7
10.	Renewed sewer connections.....	1

The above table refers to premises holding a licence of the first, third or fourth category only.

CLEAN FOOD.

The Food and Drugs Act, 1955, was not put into operation on the mainland until December of that year, so, in order to keep in line, no action on Jersey legislation was taken, but the general intention has been reflected in the informal approach to the local food trade. Difficulty is experienced in backing this with authority, and the early introduction of clean food legislation in Jersey is recommended.

The hope expressed in last year's report that meat carriage, especially in handcarts, would improve, has been largely realised though much remains to be done. The co-operation of the Abattoir Superintendent has been appreciated.

Routine inspections of restaurants, cafés amounted to 119. Food preparation premises were visited on 30 occasions, shops, bakehouses, etc., on 190. Food vehicles and itinerant retailers were inspected on 18 occasions.

Of 20 ice cream samples submitted for bacteriological examination, 4 were unsatisfactory, "Followup" action was carried out. All of 20 chemical samples were satisfactory.

UNSOUND FOOD.

Unsound food examinations numbered 125 and 294, certificates of condemnation for human consumption were issued, the total weight of 6 tons, 10 cwt. 79 lbs. being made up of :—

MEAT AND MEAT PRODUCTS.

209 lbs. rabbit.	130 lbs. sausages.
70 lbs. scotch meat.	27 lbs. bacon.
102 lbs. ham.	434 lbs. chickens.
3 lbs. pork.	

Weight 975 lbs.

CANNED GOODS.

503 tins meat.	75 tins fish.
233 tins vegetables.	6 tins soup.
261 tins fruit.	38 tins milk.

Weight 4,231 lbs.

FISH.

913 lbs. mullet.	60 lbs. prawns.
42 lbs. mackerel.	207 lbs. fillets.
126 lbs. crab.	280 lbs. plaice.
51 lbs. haddock.	958 lbs. mixed fish.
56 lbs. herrings.	

Weight 2,693 lbs.

MISCELLANEOUS GOODS.

208 lbs. margarine.	24 lbs. porage oats.
12 lbs. butter.	290 bottles horseradish cream.
78 lbs. prunes.	7 lbs. soup powder.
400 lbs. plums.	509 bottles mayonnaise.
192 lbs. peaches.	18 lbs. pies.
24 pineapples.	40 lbs. marzipan.
368 lbs. pears.	24 lbs. frozen egg white.
1,200 lbs. cherries.	44 cases eggs. (15,840 eggs).
12 lbs. lard.	2 lbs. dates.
56 lbs. confectionery.	16 lbs. cheese.
1,120 lbs. carrots.	4 lbs. packeted cheese spread.
80 lbs. cake.	1 tin creamed rice.

Weight 6,740 lbs.

PRODUCTION OF CLEAN MILK.

METHYLENE BLUE REDUCTASE TEST.

Total number of samples taken 1,703

One thousand two hundred and fifty-nine samples of morning milk were taken from farmers cans at the collecting depots and examined on day of receipt. One thousand and sixty-nine or approximately 85.6% were satisfactory, one hundred and seventeen or 11% were fair and seventy-three or approximately 3.4% were unsatisfactory. These figures indicate that the standard achieved during the past six years is being maintained.

Four hundred and forty-four samples were taken from roundsmen, milk-shops and dairies all of which proved to be satisfactory.

PHOSPHATASE TEST.

This test which is used to indicate the efficiency of pasteurisation, produced the following results.

One hundred and ninety-one samples were taken at all stages from dairy to consumer and one hundred and seventy-five or approximately 91.7% were satisfactory, and sixteen or 8.3% were unsatisfactory. These figures show a slight improvement on the previous year and it must be pointed out that pasteurisation here, is not compulsory.

TUSTMUN SEDIMENT TEST.

Three hundred and forty-six samples were examined by this method for macroscopic examination of extraneous matter. Three hundred and fourteen or approximately 90.7% were satisfactory and thirty-two or 9.3% were fair.

CREAM BACTERIOLOGICAL TEST.

Thirty-five creams were submitted for the above test. All were satisfactory.

Farm inspections and re-inspections.....	117
Visits to dairies during pasteurisation	173
Visits to milk shops	145
Interviews	441
Complaints	2
Visits to bacteriological laboratory	206
Visits to analyst's laboratory	168
Inspections of collection and delivery vans	304
Cowshed re-constructions	2
Inspections of food premises	25

FOOD AND DRUGS SAMPLES.

Nature of sample.	Number of Samples taken.	Genuine.	Remarks.
Milk	283	280	3 not genuine were investigated and found to be satisfactory.
Cream	51	51	—

FOODS.

Seventy-eight samples of other foods were submitted for analysis comprising :—coffee—3 ; mineral water—2 ; ground cinnamon—1 ; ground almonds—1 ; sausages—4 ; semolina—3 ; desiccated coconut—1 ; ground rice—2 ; mayonnaise—1 ; grey mullet—2 ; currants—1 ; self-raising flour—2 ; cheese spread—2 ; lobster and tomato paste—1 ; chico—1 ; stoned dates—1 ; barley water crystals—1 ; concentrated mint sauce—1 ; malt vinegar—1 ; butter—3 ; peanut butter—1 ; Sunnyspread—1 ; jam—4 ; pears (raw)—4 ; pears (canned)—8 ; peaches—1 ; tinned salmon—1 ; lemonade powder—1 ; pâté de foie truffe—1 ; milk pudding—1 ; sandwich spread—1 ; savoury spread—1 ; creamed rice canned—1 ; Robinade—1 ; meat paste—3 ; pâté pur porc—1 ; iodised salt—4 ; lard (canned)—1 ; Jaffa juice—1 ; non-brewed vinegar—1 ; stewed beef steak—1 ; porc luncheon meat—1 ; crab meat—1 ; icing sugar—1 ; cockles—1 ; lemon juice—1 ;.

DRUGS.

Cod liver oil—5 ; halibut liver oil—2 ; disinfectant—4 ; saccharin tablets—6 ; aspirin tablets—6 ; A.P.C. tablets—3 ; Iodex—2 ; zinc and castor oil ointment—3 ; non-staining iodine ointment—2 ; zinc castor oil and benzoin ointment—1 ; bicarbonate of soda—1 ; borax—3 ; Parrish's food—5 ; camphorated oil—3 ; glycerine—3 ; sun tan creams—6 ; Ribena—1 ; Rose hip syrup—3 ; Multivite tablets—1 ; Pleurivite tablets—1 ; tincture auranti—1 ; spirit of camphor—1 ; seidlitz powder—2 ; tincture of morphine and chloroform—1 ; Ephedrine hydrochloride tablets—2 ; chlorodyne tablets—1 ; carbolated petroleum jelly—1 ; phenol ointment—1 ;.

Seven foods and five drugs were found to be unsatisfactory and the necessary action was taken.

ATMOSPHERIC POLLUTION.

One hundred and sixteen smoke observations were carried out during the year, twenty-seven visits were made giving advice, at premises where smoke nuisances were being made. One large boiler was fitted with an anti-smoke device, which has resulted in a marked decrease in the amount of smoke emitted from the chimney, and a consequent saving in fuel.

GENERAL IMPROVEMENTS TABLE.

The undermentioned figures are the result of complaints received and requests for advice on existing properties.

New connections to sewer	24
Renewed connections to sewer.....	110
Drainage systems remodelled	147
Modified sewage disposal plants installed.....	53
Soakaways built.....	29
Drains unchoked	38
Foul soakaways or cesspools abolished	33
Brick and old drains abolished.....	51
Petrol interceptors	1

PLUMBING WORK.

New baths installed	67
New sinks installed	58
New wash-hand basins installed.....	133
New urinals installed	1

IMPROVEMENTS TO SANITARY CONVENIENCES.

New water closets constructed.....	115
Foul privies and closets abolished	28
Miscellaneous nuisances abated	67
Drainage examinations.....	20

A considerable amount of renewed house drainage was effected as a result of liaison with sewer maintenance work.

CESSPOOL EMPTIERS.

Two thousand four hundred and eighty septic tanks, soakaways, etc.—a total of four thousand two hundred and forty-four loads—were emptied by the cesspool emptiers.

RODENT CONTROL OPERATIONS.

One hundred and twenty-two new pest complaints were investigated and serviced, whilst old recurring cases together with the new, required six hundred and ninety-four re-inspections and treatments. Destruction service was carried out on five hundred and forty-one occasions. In addition, spraying was done for cockroaches, hibernating flies and wasps nests.

Owing to the present sewer situation, the organised baiting of sewer man-holes was discontinued this year, and in its place, working in co-operation with Sewerage Board Department, blocks of Warfarin and Zinc Phosphide treated biscuits were used. From results observed it would appear that the rat population in the sewers is being kept well under control.

SANITARY INSPECTORS' CONFERENCE.

As your delegate, I attended the above conference held at Scarborough, and would like to take this opportunity of thanking you.

L. HAMMOND,
Chief Sanitary Inspector.

GENERAL HOSPITAL.
STATISTICAL TABLES for the Year ending
31st December, 1955.

ADMISSIONS AND DISCHARGES.

PATIENTS AND INMATES AT THE GENERAL HOSPITAL ON
 1st JANUARY, 1955 241

Month.	Admissions.	Discharges.	Remaining at end of Month.
January	275	230	286
February	246	247	285
March... ..	266	273	278
April	223	230	271
May	271	255	287
June	322	325	284
July	308	308	284
August	291	298	277
September	278	259	296
October	216	251	261
November	288	258	291
December	237	286	242
	3,221	3,220	

PATIENTS AND INMATES AT THE GENERAL HOSPITAL ON
 31st DECEMBER, 1955 242

STATISTICS FOR THE YEAR TO 31st DECEMBER, 1955.

IN-PATIENTS.

Number of Patients at beginning of the Year.....	97
Number of Patients admitted during the Year.....	3,134
Number of Patients at the end of the Year	105
Average number of Patients resident daily throughout the Year	133

ANNUAL EXPENDITURE ON IN-PATIENTS AND AVERAGE COST OF
EACH IN-PATIENT PER WEEK.

	Expenditure on In-Patients.	Average cost of each In-Patient per week.
	£	£ s. d.
Provisions	19,304	2 15 8
Surgery and Dispensary	11,273	1 12 6
Domestic	15,954	2 6 0
Salaries and Wages	81,148	11 14 0
Miscellaneous	2,477	7 2
Administration	3,732	10 9
Establishment Renewals and Repairs	3,675	10 7
Total Cost... ..	137,563	19 16 8

GENERAL HOSPITAL STATISTICAL TABLES.

STATISTICS FOR THE YEAR TO 31st DECEMBER, 1955.

OUT-PATIENTS DEPARTMENTS.

NEW PATIENTS AND ATTENDANCES.

Departments.	New Patients.	Attendances.
Casualty	13,430	34,106
Eye	731	2,506
E.N.T.	478	1,352
Skin	286	992
Medical	181	1,561
Cardiac	131	651
Surgical	1,107	3,001
Children... ..	63	359
Special	40	202
Daily Medical and Surgical Clinics ...	1,133	3,844
X-Ray, including Deep Therapy... ..	6,424	8,277
Dental	943	2,736
Physiotherapy	759	8,144
Orthopædic	429	1,881
Psychiatry	250	1,963
Orthoptic	71	882
Total	<u>26,456</u>	<u>72,457</u>

PHARMACY PRESCRIPTIONS OVER THE PAST TWELVE
MONTHS

19,119

GENERAL HOSPITAL. STATISTICAL TABLES.

STATISTICS FOR THE YEAR TO 31st DECEMBER, 1955.

OUT-PATIENTS DEPARTMENTS.

Total Number of New Out-Patients	...	...	...	...	26,456
Total Number of Out-Patient Attendances	...	...	...	...	72,457

ANNUAL EXPENDITURE ON OUT-PATIENTS AND AVERAGE COST OF EACH OUT-PATIENT ATTENDANCE.

	Expenditure on Out-Patients.	Average Cost of each Out-Patient Attendance.
	£	
Provisions	1,299	4.30.d.
Surgery and Dispensary	9,683	32.08.d.
Domestic	2,150	7.12.d.
Salaries and Wages	15,252	50.52.d.
Miscellaneous	366	1.21.d.
Administration	1,773	5.87.d.
Establishment Renewals and Repairs.	680	2.25.d.
	31,203	103.35.d.

STATEMENT OF AFFAIRS
to December 31st, 1955.

General Hospital, Statement of Affairs

	£	s.	d.	£	s.	d.
HOSPITAL BALANCES AS						
AT 1st JANUARY, 1955.						
Amount due from Paying						
Patients	12,678	16	6			
Amount due from Parishes	5,116	0	10			
				17,794	17	4
TREASURER OF THE						
STATES OF JERSEY.						
Expenditure during the						
twelve months to date on						
the following Votes :—						
Salaries and Wages ...	124,601	1	7			
Maintenance & Supplies.	77,173	8	0			
Upkeep of Buildings and						
Insurance	6,419	14	0			
Pensions... ..	687	5	4			
Patients travelling to						
England	1,550	0	3			
Contributions in Sus-						
pense	1,457	11	7	211,889	0	9

£229,683 18 1

for the Year ended 31st December, 1955.

TREASURER OF THE
STATES OF JERSEY.

Receipts during the twelve
months to date under the
following heads.

Interest on Investments	320	3	2
Paying Patients	17,542	14	9
Sundries	3,198	12	0
Parishes	16,514	1	1
Contributions in Sus- pense	1,450	1	0
Appliances in Sus- pense	8	0	0

39,033 12 0

MAINTENANCE ACCOUNT.

Hospital for twelve months to date	172,283	19	3		
Appropriation Account...	1,430	2	5		
Adjustments—Parishes...	220	2	6	173,934	4 2

HOSPITAL BALANCE AS AT
31st DECEMBER, 1955.

Amount due from Paying Patients	11,190	4	9		
Amount due from Parishes	5,525	17	2	16,716	1 11

£229,683 18 1

MALE POOR LAW DEPARTMENT. STATISTICAL TABLES.

STATISTICS FOR THE YEAR TO 31st DECEMBER, 1955.

Number of Inmates at the beginning of the Year...	56
Number of Inmates admitted during the Year ...	57
Number of Inmates at the end of the Year	48
Average number of Inmates resident daily throughout the Year	55

ANNUAL EXPENDITURE ON INMATES AND AVERAGE COST OF EACH
INMATE PER WEEK.

	Expenditure on Inmates.	Average Cost of each Inmate per week.
	£	£ s. d.
Provisions	4,306	1 10 0
Surgery and Dispensary	416	2 11
Domestic	1,532	10 8
Salaries and Wages	4,602	1 12 1
Miscellaneous	27	2
Administration	87	7
Establishment Renewals and Repairs	150	1 1
Total Cost... ..	11,120	3 17 6

ST. SAVIOUR'S HOSPITAL.

MEDICAL SUPERINTENDENT'S REPORT FOR THE YEAR 1955.

I have the honour to submit for your consideration the Eighty-Seventh Annual Report of the work of the hospital.

The following table indicates the changes which have taken place amongst the patients :

	Male		Female		Total
Number resident on 1st January 1955	86	...	138	...	224
Number admitted during the year					
1955	22	...	24	...	46
Number discharged during the year					
1955	13	...	19	...	32
Number deceased during the year					
1955	5	...	3	...	8
Number resident on 31st December					
1955	90	...	140	...	230
Total under treatment during 1955...	108	...	162	...	270

ADMISSIONS.

There was a fall in the admission rate, the total being 46, or 8 fewer than in 1954. 22 were males, 14 of them fresh and 8 recurrent cases. Of the 24 females, 13 were new patients and 9 had been previously resident.

Classification by Age and Sex.	Male	Female
Over 70 years	2	4
50—70 years	6	11
30—50 years	7	5
15—30 years	7	4

DISCHARGES.

13 male and 19 female patients were discharged during the year, in all 9 fewer than in the previous year. The fall in admissions is thus paralled by a fall in the discharge rate, and the hospital remains full to capacity.

	Male		Female		Total
	<hr/>		<hr/>		<hr/>
Discharged recovered ...	3	...	3	...	6
Discharged relieved to the care of relations or friends	6	...	14	...	20
Discharged unimproved to the care of relatives ...	1	...	1	...	2
Discharged to Poor Law Departments	—	...	1	...	1
Discharged to Mental Hos- pital in England	2	...	—	...	2
Rapatriated to France ...	1	...	—	...	1

DEATHS.

Only 8 patients died during the year, 5 fewer than the year before, and all from natural causes. 5 were males and 3 females, their average age being 73 years.

HEALTH.

The health of the patients and staff has remained uniformly good. All were vaccinated against small-pox in January in view of the outbreak of that disease in Brittany. There has been no outbreak of infectious disease and no fresh cases of tuberculosis were disclosed on routine X-ray examination. Two male patients sustained fractures in accidental falls, the left elbow being injured in both cases.

CHARGEABILITY.

The chargeability of patients remaining under treatment at the end of the year is as follows :

CLASS.	Male		Female		Total	
First	3	...	7	...	10	
Second	3	...	14	...	17	
Third	3	...	16	...	19	
RATE-AIDED.						
Island	6	...	24	...	30	
St. Helier	44	...	45	...	89	
St. John	—	...	2	...	2	
St. Saviour	5	...	7	...	12	
St. Lawrence	3	...	5	...	8	
St. Martin	3	...	6	...	9	
St. Ouen	8	...	1	...	9	
St. Clement	2	...	2	...	4	
St. Peter... ..	4	...	1	...	5	
Grouville	3	...	1	...	4	
St. Brelade	3	...	4	...	7	
Trinity	—	...	4	...	4	
St. Mary	—	...	1	...	1	
	90		140		230	

MAISON DE LA MARTINE.

					Male		Female		Total
Number resident on 1st									
January					12	...	10	...	22
Number admitted during									
the year					2	...	2	...	4
Number discharged during									
the year					2	...	2	...	4
Number deceased during									
the year					—	...	—	...	—
Number resident on 31st									
December					12	...	10	...	22

No major changes have taken place in the Children's Unit, and there has been comparatively little sickness amongst the patients there. It is pointed out that of the 4 discharges shown, only one went home, the others being transferred to the main hospital under certificate on attaining adult status.

STAFF CHANGES.

Mr. J. J. Kenny, Chief Male Nurse, retired at the end of February after 24 years service. I would like to express my appreciation of his constant and devoted attention to his patients, and wish him well in his retirement. I welcome as his successor Mr. Rex Bollington, S.R.N., R.M.N., who is already proving his worth.

Mr. M. Bloomfield, Assistant Engineer, also left at the end of the year.

OCCUPATIONAL THERAPY.

The O.T. Department held a successful Sale of Work, which was kindly opened by Mrs. Le Marinel, wife of the President of the Public Health Committee, on the 17th November. The Le Quesne Cup for handicrafts, presented at the Eisteddfod, was won for the third year in succession, a meritorious performance.

ENTERTAINMENTS.

The usual programme of entertainments has been carried out. The Green Room Club, ever generous, brought live shows to the hospital in January and March, and invited groups of patients to their shows in town. In August, a visiting concert party from the mainland gave an excellent variety performance. The cinema was well attended as usual, but the poor acoustics in the hall make it a less satisfactory form

of entertainment here. The Annual Picnics for male and female patients took place in June and this year the weather was kinder. These outings were supplemented by coach drives which were also much appreciated. Christmas festivities were well up to standard, and the beautiful decorations were the subject of much favourable comment from visitors.

DISTINGUISHED VISITORS.

H.E. the Lieut.-Governor, Admiral Sir Gresham Nicholson, K.B.E., C.B., D.S.O., D.S.C., and Lady Nicholson, honoured the hospital with a visit on New Year's Eve and wished patients and staff the Compliments of the Season. In October, the Lady Norman, Chairman of the National Association for Mental Health, favoured us with a visit.

DIVINE SERVICE.

Monthly services, with Communion services in addition, have been held by the Vicar of Gouray. Mass has also been said regularly for the Roman Catholic patients.

GARDEN AND GROUNDS.

The long periods of fine weather helped the gardener, with the assistance of a number of male patients, to maintain and improve on the floral beauty of the grounds and gardens, so often a subject of favourable comment.

THE FARM.

On the year's working, the farm showed a loss of £222 10s. 10d. The value of the milk, eggs, pork, potatoes, fruit and fresh vegetables supplied to the hospital was £4,691 19s. 8d. at market prices.

REPAIR AND UPKEEP OF BUILDINGS.

Redecoration and maintenance work have been carried out according to schedule, and the buildings have been suitably cared for during the year.

HEAT, LIGHT, POWER AND WATER.

The Insurance Company's Inspector has reported favourably in respect of these essential services, and the Hospital Engineer and his staff are to be congratulated on the standards they have maintained.

CONCLUSION.

It is perhaps opportune before I close to indicate how present trends may affect future development of the Hospital. The introduction recently of the new tranquillising drugs is having noticeable effects—the general atmosphere in the wards is calmer and there is less destruction. It may be, too, that as the use of such drugs becomes wider in general practice, some patients who would otherwise need to be admitted to hospital may remain manageable in their own homes.

The hospital, nevertheless, remains full at the present time, but the problem of accommodation is very different on the female side from that on the male side. No fewer than 60 of the 140 female patients are over 65 years of age, and more suitable circumstances could perhaps be provided elsewhere for the care of at least some of these elderly ladies on a non-statutory basis.

On the male side the preponderance of younger patients, particularly of the mentally defective, gives cause for much thought, as their stay in hospital is likely to be longer, and it may soon become essential to segregate the mentally defective patients elsewhere, a change which would be to the mutual benefit of both the mentally defective and the mentally ill.

It gives me great pleasure to record the devoted assistance of the staff in all departments of the hospital in the task of caring for the welfare of the patients, and I am most grateful to the President and Members of the Public Health Committee for their generous encouragement and support.

JOHN WISHART,
B.A., M.B., B.S., M.R.C.S., L.R.C.P., D.P.M.,
Medical Superintendent.

St. Saviour's Hospital—Statement of Affairs,

	£	s.	d.	£	s.	d.
HOSPITAL BALANCES 1st JANUARY, 1955.						
Amounts due from Parishes	5,703	15	0			
Amounts due from Pension- naires, Nett	2,113	17	2			
	<hr/>			7,817	12	2

TREASURER OF THE STATES OF JERSEY.

Expenditure on the following Votes :—

Rental, Queen's Farm and Land	279	0	0			
Salaries and Wages ...	38,023	5	5			
Pensions... ..	612	8	0			
Upkeep of Buildings ...	2,893	15	1			
Maintenance & Supplies.	35,404	13	6			
Cherryl W. Barrington Gent (deceased) ...	85	0	0			
	<hr/>			77,298	2	0

£85,115 14 2

Year ended 31st December, 1955.

TREASURER OF THE STATES OF JERSEY.

	£	s.	d.	£	s.	d.
Receipts on the following Estimates during the Year to date.						
Pensions... ..	7,679	10	0			
Sundries... ..	758	17	9			
Parishes	22,296	15	0			
	<hr/>			30,735	2	9

MAINTENANCE, APPROPRIATION AND FARM ACCOUNTS.

Nett Cost twelve months
to date.

Maintenance	41,461	19	11
Appropriation	4,249	10	5
Farm	222	10	10

45,934 1 2

HOSPITAL BALANCES AT 31st DECEMBER, 1955.

Amounts due from Parishes	5,681	5	0
Nett Amounts due from Pensionnaires... ..	2,765	5	3

8,446 10 3

£85,115 14 2

St. Saviour's Hospital—Maintenance Account

	£	s.	d.	£	s.	d.
TO ORDINARY EXPENDITURE.						
1. PROVISIONS	19,839	11	7	19,839	11	7
2. SURGERY & DISPENSARY.						
Drugs, Chemicals and						
Disinfectants ...	1,218	0	0			
General Equipment...	140	9	10			
	<hr/>			1,358	9	10
3. DOMESTIC.						
Furniture and Fix-						
tures, Renewal and						
Repairs... ..	612	14	5			
Patients Clothing ...	1,654	14	8			
Bedding and Drapery	699	13	2			
Rent, Light, Heat,						
Power, Insurance,						
etc... ..	9,485	7	3			
Uniforms, Staff ...	354	14	6			
Occupational Therapy	1,111	15	1			
	<hr/>			13,918	19	1
4. SALARIES AND WAGES,						
AND PENSIONS.						
Other Officers and						
Employees	31,379	8	3			
Pensions to Retired						
Employees	612	8	0			
Medical and Dental						
Treatment of Pa-						
tients	1,453	5	6			
	<hr/>			33,445	1	9
5. MISCELLANEOUS.						
General and Miscel-						
laneous Expenses...	673	3	0			
Travelling Expenses..	612	14	1			
Maintenance Allow-						
ances	278	3	8			
Newspapers, Periodi-						
cals and Press						
Notices... ..	246	13	3			
	<hr/>			1,810	14	0
Carried forward...				£70,372	16	3

Year ended 31st December, 1955.

	£	s.	d.	£	s.	d.
BY INCOME.						
Charges to In-Patients and Parishes	30,605	3	1			
BY BALANCE, being the Nett Cost of the Institution to date (Maintenance of patients only), car- ried to Statement of Affairs... ..	41,461	19	11			

STATISTICS FOR UNIT OF COST.

Number of days in period... ..	365
Number of paying patient days ...	77,222
Number of non- paying patient days	13,057
Average Cost per patient per day.	15/11.585d.
Average receipt per paying pa- tient per day ...	7/11d.

Carried forward... £72,067 3 0

St. Saviour's Hospital—

	£	s.	d.	£	s.	d.
Brought forward...				70,372	16	3
6. ADMINISTRATION.						
Medical Superinten-						
dent	1,400	0	0			
Postages, Telegrams						
and Telephones ...	98	8	3			
Books and Stationery	139	18	10			
				1,638	7	1
7. ESTABLISHMENT.						
Chaplain	50	0	0			
Carriage, Freights &						
Wharfage	5	19	8			
				55	19	8
				£72,067	3	0

APPROPRIATION ACCOUNT.

	£	s.	d.	£	s.	d.
TO EXTRAORDINARY EXPENDITURE.						
Repairs and Upkeep of						
Buildings	4,118	4	10			
Roads, Avenues and Gar-						
dens, Upkeep	46	5	7			
<i>re</i> Cherryl W. Barrington						
Gent (deceased) ...	85	0	0			
				£4,249	10	5

FARM ACCOUNT.

	£	s.	d.	£	s.	d.
TO GENERAL EXPENSES, Labour,						
Forage, etc.	5,456	16	10			
				£5,456	16	10

Maintenance Account—*continued.*

	£	s.	d.	£	s.	d.
Brought forward...	72,067	3	0			

£72,067 3 0

APPROPRIATION ACCOUNT.

	£	s.	d.	£	s.	d.
BY BALANCE, carried to State- ment of Affairs	4,249	10	5			

£4,249 10 5

FARM ACCOUNT.

	£	s.	d.	£	s.	d.
BY SALES, Potatoes, Live Stock, etc.	542	6	4			
BY SUPPLIES to the Institution: Milk, Pork, Vegetables, Potatoes, etc.... ..	4,691	19	8			
BY BALANCE, carried to State- ment of Affairs	222	10	10			

£5,456 16 10

THE JERSEY MATERNITY HOSPITAL.

During the year 1955, the total number of women delivered at the Jersey Maternity Hospital was 604, and the number of booked cases was 200. Details of the cases dealt with are as follows :—

Number of deliveries with medical aid ...	...	...	53
Do.	forceps...	...	65
Do.	by doctors	...	190
Do.	by midwives	...	389
Do.	by Cæsarean Section	...	25

In addition there were 10 cases of delivery at home before the arrival of the midwife.

The total number of live births was 612, comprising 287 boys and 325 girls. Included in this number were 11 sets of twins :—

- (a) 1 set of males.
- (b) 8 sets Females.
- (c) 2 sets 1 boy and 1 girl.

The average weight of the live boys was 7 lb. 4 oz. whilst the heaviest boy weighed 10 lb. 11 oz. and the lightest 1 lb. 8 oz.

The average weight of the girls was 6 lb. 12 oz. whilst the heaviest girl weighed 10 lb. 13 oz. and the lightest 1 lb. 9 oz.

The number of stillbirths was 12, due to the following causes, in addition there was 1 abortion.

- | | |
|---|-------------------------------------|
| (a) Male Hydrocephalic. | (h) Male difficult forceps. |
| (b) Male Macerated (Mother had Chorea) | (i) Female Macerated Hydrocephalic. |
| (c) Male Macerated. | (j) Female placental insufficiency. |
| (d) Female. | (k) Female Macerated (Toxæmia) |
| (e) Female Macerated. | (l) Male Macerated. |
| (f) Male Macerated. | 1 Abortion (Male) |
| (g) Female Breech (Mother ruptured uterus). | |

The number of Neo-natal deaths was 15, due to the following causes :—

- | | |
|---|--|
| 1 Female Prematurity. | 1 Female Prematurity. |
| 1 Male Prematurity. | 1 Male |
| 1 Female Prematurity. | 1 Male Prematurity. |
| 1 Male Broncho-Pneumonia and cerebral injury. | 1 Set Twins. 1 male and 1 female Prematurity. |
| 1 Male Prematurity. | 1 Female Prematurity. |
| 1 Female Prematurity. | 1 Female gross abnormality of legs feet and shoulders. |
| 1 Set twins 1 male and 1 female Prematurity. | |

In addition, 58 circumcisions and 126 operations for rupture of membranes were performed at the Hospital.

The number of attendances at the Out Patient Clinic was 968.

SANDYBROOK HOSPITAL.

I have the honour to present to you and to your Committee my report on the affairs of Sandybrook Hospital for the year 1955.

In this report I am anxious to depart from a cold statistical review—though statistics are of course necessary—but rather to present a resumé of the homely conditions we have tried to inculcate into this establishment.

Another year has passed and again not without a further radical change. Miss Hodgkinson resigned after a year of office as Matron and Miss Owens was appointed to this position in November.

Miss Owens was assistant Matron at the General Hospital for 6 years and we are indeed fortunate in having such an experienced and sympathetic lady in charge of what I regard as much a “home for old ladies” as a hospital.

Miss Owens has introduced some fundamental changes. It had been the custom to engage junior Staff at the age of 15—16 years. But this age of qualification for engagement has been raised to 18 years with undoubtedly an increase in efficiency and understanding.

The change of sitting room, although necessitating a reduction of bed accommodation of two, has given to the old ladies appreciatively more comfort and—when they wish it—“to be by themselves”.

One corridor has been enlarged and adapted to facilitate the passage of wheelchairs.

Duty rooms have been introduced on each ward and additional toilets and bathrooms added but still not quite sufficient for all requirements.

The year was historical for the celebration of the centenary of one resident—Miss Huelin and we are hoping to celebrate a similar anniversary of another patient in 1957.

Christmas was celebrated in the customary fashion, with the added attraction of a very pleasing exhibition of conjuring by Mr. Burgess.

The old people have settled down very quickly and very happily to the changes of staff and structure and I sense a feeling of general quiet and content.

The following are the statistics for the year 1955.

Number of Patients at the beginning of the year...	...	...	...	...	...	...	...	...	88
Number of Patients at the end of the year	...								89
Number of Patients admitted	...	...	...	...					30
Average daily residents	...	...	...	...	...				87
Deaths	...	...	...	...	...	...	...	...	20
Average age at death	...	...	...	...	...	...	...	...	80.9 yrs.

May I again thank you Sir and your Committee for the help and encouragement I have received throughout this year.

J. OLIVER CLYDE,
Visiting Physician.

SANDYBROOK ANNEXE.

STATISTICAL TABLES.

STATISTICS FOR THE YEAR TO 31st DECEMBER, 1955.

Number of Inmates at the beginning of the Year	88
Number of Inmates admitted during the Year... ..	30
Number of Inmates at the end of the Year	89
Average number of Inmates resident daily throughout the Year	87

ANNUAL EXPENDITURE ON INMATES AND AVERAGE COST OF EACH
INMATE PER WEEK.

	Expenditure on Inmates.	Average Cost of each Inmate per week.		
		£	s.	d.
Provisions	5,929 ...	1	6	2
Surgery and Dispensary	1,098 ...		4	10
Domestic	6,349 ...	1	8	0
Salaries and Wages	14,640 ...	3	4	6
Miscellaneous	158 ...			8
Administration	218 ...		1	0
Establishment Renewals and Repairs	1,997 ...		8	10
Total Cost	30,389 ...	6	14	0

AMBULANCE SERVICE.

In connection with the above service, I herewith submit the following report for the year 1955.

CASES TRANSPORTED.

General	...	...	...	...	...	...	...	...	1,633
Maternity	...	...	...	...	...	...	...	...	68
Accident...	...	...	...	...	...	...	...	...	509
X-Ray	...	...	...	...	...	...	...	...	271
Fever	...	...	...	...	...	...	...	...	16
Mortuary	...	...	...	...	...	...	...	...	81
By Air	...	...	...	...	...	...	...	...	61
By Sea	...	...	...	...	...	...	...	...	32
Patients requiring special treatment	...	...	...	...	...	...	...	...	533
Total	...	...	...	...	...	...	...	...	3,204

TOTAL MILEAGE	...	...	...	...	...	27,229
PETROL CONSUMED	...	...	...	...	...	2,048 gals.
OIL CONSUMED	...	...	...	...	...	100 qts.
AMBULANCE HIRE CHARGES	...	...	...	...	...	£979 10s. od.

ACCIDENTS RECORDED AS FOLLOWS—

Motor cars	...	...	37	Motor Cycles...	...	50
Cycles...	...	...	28	Pedestrians	...	25

pp. Commissioner,

E. BURBIDGE,
Transport Officer.

